

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002751

FILED  
Apr 16, 2012  
Secretary of State

Entity Name: EBOARD SOLUTIONS, INC.

**Current Principal Place of Business:**

5120 SUGARLOAF PARKWAY  
LAWRENCEVILLE, GA 30043

**New Principal Place of Business:**

**Current Mailing Address:**

5120 SUGARLOAF PARKWAY  
LAWRENCEVILLE, GA 30043

**New Mailing Address:**

FEI Number: 51-0619059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

INCORP SERVICES, INC.  
17888 67TH CT. NORTH  
LOXAHATCHEE, FL 33470 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: HENRY, JEANNIE M.  
Address: 1923 SHENLEY PARK LANE  
City-St-Zip: DULUTH, GA 30096

Title: ST  
Name: WILLIS, MARK A.  
Address: 5710 BERRYTON COURT  
City-St-Zip: NORCROSS, GA 30092

Title: D  
Name: DAWKINS, GILLIS  
Address: 2011 NORTHSIDE ROAD  
City-St-Zip: PERRY, GA 31069

Title: D  
Name: TURPIN, AARON  
Address: 711 GREEN ST, NW  
City-St-Zip: GAINESVILLE, GA 30501 33

Title: D  
Name: MITCHELL, BAILEY  
Address: 1120 DAHLONEGA HWY  
City-St-Zip: CUMMING, GA 30040

Title: D  
Name: KELLEY, JAMES DR.  
Address: 904 IROQUOIS TRAIL  
City-St-Zip: GOODLETTSVILLE, TN 37072

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK A. WILLIS

ST

04/16/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date