

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22788

FILED  
Apr 06, 2006  
Secretary of State

Entity Name: RALPH WHITEHEAD ASSOCIATES, INC.

**Current Principal Place of Business:**

4348 SOUTHPOINT BLVD  
STE 310  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 35624  
CHARLOTTE, NC 282355624 US

**New Mailing Address:**

FEI Number: 56-0730953      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: BRIGGS, RONALD C  
Address: 10800 MIDLOTHIAN TURNPIKE  
City-St-Zip: RICHMOND, VA 23235

Title: ASD ( ) Delete  
Name: DEHLER, BRIAN D  
Address: 1000 W. MOREHEAD, STE. 200  
City-St-Zip: CHARLOTTE, NC 28208

Title: ATD ( ) Delete  
Name: SIGMON, GREGORY R  
Address: 1000 W. MOREHEAD, STE. 200  
City-St-Zip: CHARLOTTE, NC 28208

Title: VP ( ) Delete  
Name: GAGNE, JEFFEY L  
Address: 1000 WEST MOREHEAD STREET  
City-St-Zip: CHARLOTTE, NC 28208

Title: VPD ( ) Delete  
Name: ZIMMERMAN, GEORGE T  
Address: 3505 KOGER BLVD  
City-St-Zip: DULUTH, GA 30096

Title: P ( ) Delete  
Name: KELLEY, KENNETH T  
Address: 4348 SOUTHPOINT BLVD  
City-St-Zip: JACKSONVILLE, FL 32216

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RONALD C. BRIGGS

VPD

04/06/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date