

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33979

Entity Name: EBI COMPANIES, INC.

FILED
Feb 15, 2006
Secretary of State

Current Principal Place of Business:

9300 ARROWPOINT BLVD
CHARLOTTE, NC 28273

New Principal Place of Business:

Current Mailing Address:

PO BOX 1000
CHARLOTTE, NC 28273

New Mailing Address:

FEI Number: 06-1287148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: DP () Delete
Name: TIGHE, JOHN
Address: 9300 ARROWPOINT BLVD
City-St-Zip: CHARLOTTE, NC 28273 US

Title: DSVP () Delete
Name: BEATTY, SEAN A
Address: 9300 ARROWPOINT BLVD
City-St-Zip: CHARLOTTE, NC 28273

Title: T () Delete
Name: FULLER, GWYN
Address: 9300 ARROWPOINT BLVD
City-St-Zip: CHARLOTTE, NC 28273

Title: DSVP () Delete
Name: CAHILL, DENNIS W
Address: 9300 ARROWPOINT BLVD
City-St-Zip: CHARLOTTE, NC 28273

Title: CS () Delete
Name: PETTIGREW, LINDA Y
Address: 9300 ARROWPOINT BLVD
City-St-Zip: CHARLOTTE, NC 28273

Title: VP () Delete
Name: OTT, MICHAEL K
Address: 9300 ARROWPOINT BLVD
City-St-Zip: CHARLOTTE, NC 28273

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LINDA Y. PETTIGREW

CS

02/15/2006

Electronic Signature of Signing Officer or Director

_____ Date