

RECEIVED-FPSC

07 AUG 31 AM 11:42

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 07N427

Executive Business Centers, Inc.
 Mr. Doug Trivers
 Building 2, Suite 200
 11330 Lakefield Drive
 Dunwoody GA 30097-1582

PSC-07-0697-PAA-TI

2. Article Number
(Transfer from service label)

7006 0810 0002 3488 2016

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

| | | |
|--|---------------------------------------|--|
| A. Signature X <i>[Signature]</i> | | <input type="checkbox"/> Agent |
| | | <input type="checkbox"/> Addressee |
| B. Received by (Printed Name) <i>TRIVERS</i> | C. Date of Delivery <i>8-29-07</i> | |
| D. Is delivery address different from item 1? If YES, enter delivery address below: | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| | |
|--|---|
| Service Type | |
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail |
| <input type="checkbox"/> Registered | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> C.O.D. |

4. Restricted Delivery? (Extra Fee) Yes

DOCUMENT NUMBER-DATE

07881 AUG 31 5

FPSC-COMMISSION CLERK