## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 858184
OGRAM/OZELL ARCHITECTS INC.

(5)

FILED Mar 09 1998 8:00am Secretary of State

						II BIBI BIBI BIBI BIBI BIBI
Principal Place of Business Mailing Address						
659 PEACHTREE ST		659 PEACHTREE ST.			i	
STE. 1800 Atlanta ga 30308 US		STE. 1600 ATLANTA GA 30308			DO NOT WRITE IN THIS SPACE	
		US		3. Date incorporated or Qualified		
					10/19/1983	
2. Principal P	Place of Business	2a. Mailing Address			4, FEI Number	Applied For
21		26			58-1481905	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	io .	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	y	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
	g. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	d Agent
OZ	TELL, ALAN M. P.E.		8	Name		
	46 LA MESA DRIVE		B	Stroot Ad	dress (P.O. Box Number is Not Acceptable)	
	CKSONVILLE FL 32217		6	SireerAu	idless (F.O. Box Number is Not Acceptable)	
374			8:	3	·	
			_	ļ		1-1
			84	City	FI	85 Zip Code
11, Pursuant	to the provisions of Sections 607.050	12 and 607 1508, Florida Statu	ites, the abo	ve-named co	orporation submits this statement for the purpose	of changing its registered
office or r	registered agent, or both, in the State	of Florida, Such change was ations of Section 607,0505, F	authorized b	by the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as registered
	an terme way, toxi accept the coning	(100 mile (m. (m. 6)(m) (m) (22/200, )	ionicia otatoti	J.G.		
SIGNATURE	Signature, typed or printed name of registered age	ent and title diapplicable (NC	TL Registered A	gent signature reg	guired when reinstating) DATE	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	OZELL, PHILLIP D.		1.2 NAME	.		
STREET ADORESS	1930 WINDHAM PARK NE		1.3 STRE	T ADDRESS		
CITY-ST-ZIP	ATLANTA GA		1.4 CITY	ST-ZIP		
TITLE	VP	☐ DELETE	21 TITLE			Change Addition
NAME	STANKUS, ROMAN		2 2 NAME			
STREET ADORESS	973 CLIFTON ROAD		2.3 STRE	T ADDRESS		
CITY-ST-ZIP	ATLANTA GA		2 4 CITY	- S1 - ZIP		
TITLE		DELETE	3 1 TITLE			Change Addition
NAME			3.2 NAME			,
STREET ADDRESS			3.3 STRE	T ADDRESS		
CITY-ST-ZIP			3.4. CiTY	- ST - ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STRE	ADORESS		
CITY-ST-ZIP	İ		4.4 CITY	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	. [		
STREET ADDRESS	l		5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY	- 1		
TITLE	<u> </u>	DELETE	6 1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			6.4 CITY	1		
WI KII						

14. I horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Phillip D Comm. ALA

2/1 /90

(404)874-7460

CR2F034 (10/97)