

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 24 PM 12:38

DOCUMENT # **F47598** (0)

1. Corporation Name
ARGENBRIGHT & ASSOCIATES, INC.

Principal Place of Business Mailing Address
3465 NORTH DESERT DRIVE **3465 NORTH DESERT DRIVE**
P. O. BOX 740132 **P. O. BOX 740132**
ATLANTA GA 30344 **ATLANTA GA 30344**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/01/1981** 3a. Date of Last Report **05/01/1994**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-2129913		<input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28					
Zip	Country	Zip	Country				
24	25	29	30				

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

JOHNSON, BLAIR
425 S. DILLARD STREET
WINTER GARDEN FL 32787-0496

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARGENBRIGHT, MICHAEL G.	1.2 NAME	
STREET ADDRESS	305 WOODSTEAD LANE	1.3 STREET ADDRESS	
CITY- ST- ZIP	LONGWOOD FL	1.4 CITY- ST- ZIP	
TITLE	CD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARGENBRIGHT, JR., FRANK	2.2 NAME	
STREET ADDRESS	325 WILDERLAKE COURT	2.3 STREET ADDRESS	
CITY- ST- ZIP	ATLANTA GA	2.4 CITY- ST- ZIP	
TITLE	P	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAVOY, ROBERT C.	3.2 NAME	PRESIDENT
STREET ADDRESS	1109 TRAILRIDGE LANE	3.3 STREET ADDRESS	FRANK ARGENBRIGHT JR.
CITY- ST- ZIP	DUNWOODY GA	3.4 CITY- ST- ZIP	325- WILDERLAKE COURT
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOX, DONALD F.	4.2 NAME	
STREET ADDRESS	2994 CLARY HILL COURT	4.3 STREET ADDRESS	
CITY- ST- ZIP	ROSWELL GA	4.4 CITY- ST- ZIP	
TITLE	S	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIMSEY, ANNABELLA	5.2 NAME	ASSISTANT SECRETARY
STREET ADDRESS	6716 BROWN'S MILL ROAD	5.3 STREET ADDRESS	CHARLOTTE DEMARCO
CITY- ST- ZIP	LITHONIA GA	5.4 CITY- ST- ZIP	288- LAKE FORREST DR.
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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 of this report, on an attachment with an address.

SIGNATURE: **DONALD F. FOX** 01-15-95 (404) 766-1818