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

NAME

STREET ADDRESS

14. I hereby certify that the informatindicated on this annual report Block 12 or Block 13 if change

SIGNATURE:

CITY-ST-ZIP

FILED PROFIT Mar 19 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # F93000003097 (3) BUTNER ARCHITECTURAL GROUP, P.C. Principal Place of Business Mailing Address 300-A WATER ST. STE 200 P.O. BOX 2109 MONTGOMERY AL 36104 MONTGOMERY AL 36102 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/06/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 63-1060755 26 Not Applicable Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Country This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM **B1** Name 1200 SOUTH PINE ISLAND ROAD **B2** Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City Zip Code 85 of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 accept the obligations of Section 607 0505. Florida Statutes 11. Pursuant to the pr office or registere agent. I am famili SIGNATURE Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition BUTNER, ERNEST S NAME 1.2 NAME 3130 PINEHURST DRIVE STREET ADDRESS 1.3 STREET ADDRESS MONTGOMERY AL 36111 CITY-ST-ZIP 14 CITY-ST-ZIP DELETÉ TITLE 21 TITLE Change Addition RUSH, JAMES M NAME 22 NAME 2844 COLONIAL DRIVE STREET ADDRESS 2.3 STREET ADDRESS **MONTGOMERY AL 36106** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition **GREENSHIELDS, GARY** NAME 3.2 NAME 1028 WILLOW SPRINGS ROAD STREET ADDRESS 3 3 STREET ADDRESS WETUMPKA AL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 opplemental 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 opplemental 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 opplementation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.4 CITY-ST-ZIP