

5-8-97 B-6640 C
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FILED
 May 08 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # F93000005383 (5)
 1. Corporation Name
 WINTER INDUSTRIAL SERVICES, INC.

Principal Place of Business Mailing Address
 530 MEANS ST. SUITE 100 ATLANTA GA 30318
 530 MEANS ST. SUITE 100 ATLANTA GA 30318-5793

3. Date Incorporated or Qualified 11/29/1993
 3a. Date of Last Report 06/21/1996

2. Principal Place of Business 2a. Mailing Address
 21 1400 Emory Street Suite, Apt. #, etc. 26 1900 Emory Street Suite, Apt. #, etc.
 22 300 (Suite) City & State 27 Suite 300 City & State
 23 Atlanta GA 28 Atlanta GA
 24 30318 Country USA 29 30318 Country USA

4. FEI Number 58-2077668 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324

10. Name and Address of New Registered Agent
 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 reinstalling) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D REID, S. BRENT 191 PINE LAKE DR NW ATLANTA GA 30327	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	D ADERHOLD, JOHN 870 FAIRFIELD RD ATLANTA GA 30327	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	D SILVERMAN, ROBERT L 2412 ALTON RD NW ATLANTA GA 30305	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	PD REID, BRAD 5727 FAIRLEY GALL COURT NORCROSS GA 30092	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	D DURKIN, SEAN 4470 MAY APPLE DRIVE ALPHARETTA GA 30202	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	AS Carter Jaudon
STREET ADDRESS		6.3 STREET ADDRESS	1346 Sheffield Glen way
CITY - ST - ZIP		6.4 CITY - ST - ZIP	Atlanta GA 30329

14. I do hereby 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: _____ DATE: 4/30/97 DAYTIME PHONE #: 404-588-0288

CR2E034 (9/96)