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**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

**CORPORATION
ANNUAL REPORT
1991**



**FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS**

**APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED**

Read Instructions on Other Side Before Making Entries

FILING FEE OF \$61.25 REQUIRED

1 Name and Mailing Address of Corporation

DOCUMENT #H51849 (2)

ZIP + 4 PRESORT

**WILLIAM R. JORDAN, INC.
& SHAWN G. RADER
215 NORTH EOLA DRIVE
ORLANDO, FL 32801-2028**

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code

DO NOT WRITE IN THIS SPACE

2. If Address in Block 1 is incorrect in any way enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed on the filing an amendment

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified
To Do Business in Florida

04/10/1985

4. FEI Number

59-2648497

FEI Number Applied For

FEI Number Not Applicable

**\$8.75 Additional Fee required
for a Certificate of Status**

CERTIFICATE OF STATUS REQUIRED

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1 P/T	JORDAN, WILLIAM R.	2252 Fountain Key Circle	Winterville, FLA 32786
2 S	RICHARDSON, E. KEITH	6901 E. INDEPENDENCE BLVD	CHARLOTTE, N.C. 28207
3			
4			
5			
6			
7			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**RADER, SHAWN G.
215 NORTH EOLA DRIVE
ORLANDO, FL 32801**

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Numbers)

83 Street Address 2 (Do NOT Use P.O. Box Numbers)

84 City

8. Name and Address of New Registered Agent

FL.

9. 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 607.0503, Florida Statutes.

SIGNATURE _____
(Registered Agent Accepting Appointment)

(DATE)

10. I 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 made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 661, Florida Statutes, and that my name appears in Block 5 or on an attachment with an address.

SIGNATURE _____

Typed Name/Signing Officer or Director

E. Keith Richardson

Title

Controller/Secretary

Telephone Number (Daytime)

(704) 335-8898

DATE **3/7/91**

FILING FEE OF \$61.25 REQUIRED—Make Checks Payable To: Secretary of State \$8.75 Additional Fee required for a Certificate of Status