

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 MAY -1 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K53091

1. Corporation Name

17-92 INVESTMENT, INC.

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified
12/22/88

3a. Date of Last Report
4/17/95

2. Principal Place of Business

2a. Mailing Address

21 FDIC - 100 Colony Sq. Box 68

26 FDIC - 100 Colony Sq. Box 68

4. FEI Number

59-2949203

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Ste. 2200

27 Ste. 2200

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

City & State

City & State

23 Atlanta, GA.

28 Atlanta, GA.

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 30361

25 USA

29 30361

30 USA

8. This corporation has ability for taxing the tax under S. 199 (32)
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and the fee applicable

(NOTE: Registered Agent signature is required when the fee is paid)

DATE

12. OFFICERS AND DIRECTORS

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D/P	☒ Change ☐ Addition
2. NAME	Patricia J. Ray	
3. STREET ADDRESS	100 Colony Sq. Box 68 Ste. 2200	
4. CITY - ST - ZIP	Atlanta, GA. 30361	
2. TITLE	D/VP/AS	☒ Change ☐ Addition
2. NAME	Charles P. Farrell, Jr.	
3. STREET ADDRESS	100 Colony Sq. Box 68 Ste. 2200	
4. CITY - ST - ZIP	Atlanta, GA. 30361	
3. TITLE	D/S/T	☒ Change ☐ Addition
3. NAME	John P. Rossetti	
3. STREET ADDRESS	100 Colony Sq. Box 68 Ste. 2200	
4. CITY - ST - ZIP	Atlanta, GA. 30361	
4. TITLE		☐ Change ☐ Addition
4. NAME		
4. STREET ADDRESS		
4. CITY - ST - ZIP		
5. TITLE		☐ Change ☐ Addition
5. NAME		
5. STREET ADDRESS		
5. CITY - ST - ZIP		
6. TITLE		☐ Change ☐ Addition
6. NAME		
6. STREET ADDRESS		
6. 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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Patricia J. Ray - President

4/18/96 (404) 270-7078

CR2E034 (12/95)