

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 26 PM 4: 06

DOCUMENT # **L75618** (3)
1. Corporation Name
ANECO, INC.

Principal Place of Business Mailing Address
**2300 ONE FIRST UNION CENTER
CHARLOTTE NC 28202-6039**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/24/1990	3a. Date of Last Report 04/20/1994
21	22		4. FEI Number 59-3009918		Applied For Not Applicable
23		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		29		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 title if applicable. (NOTE: Registered Agent signature required when registering.) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLEY, R.C.	1.2 NAME	VER HAGEN, J.K.
STREET ADDRESS	301 S. COLLEGE ST., #2300	1.3 STREET ADDRESS	301 S. COLLEGE ST., #2300
CITY - ST - ZIP	CHARLOTTE NC	1.4 CITY - ST - ZIP	CHARLOTTE, NC 28202-6039
TITLE	DC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRUDE, I.B.	2.2 NAME	
STREET ADDRESS	2650 NATIONS BANK PLAZA	2.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	2.4 CITY - ST - ZIP	
TITLE	DVAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, D J	3.2 NAME	
STREET ADDRESS	2650 NATIONS BANK PLAZA	3.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	3.4 CITY - ST - ZIP	
TITLE	P	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, R. K.	4.2 NAME	
STREET ADDRESS	400 S GREENWOOD AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	CLEARWATER FL	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEDLIN, B. J.	5.2 NAME	
STREET ADDRESS	400 S GREENWOOD AVE.	5.3 STREET ADDRESS	
CITY - ST - ZIP	CLEARWATER FL	5.4 CITY - ST - ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURNS, B. B., JR.	6.2 NAME	
STREET ADDRESS	2300 ONE FIRST UNION CTR	6.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	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 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: **1/19/95** TELEPHONE: **704-347-6800**

AMECO, INC.

**Title
Name
Address
City, State, Zip**

**V
Chu, T.S.
4651 36th Street, Suite 400
Orlando, FL 32811**

**V
Laukat, K.
10050 N.W. 116th Way, Suite 10
Medley, FL 33178**

**V
Franklin, L.W., Jr.
2000 Avenue P, Suite 16
Riviera Beach, FL 33404**

**V
Eisenberg, G.A.
301 S. College Street, #2300
Charlotte, NC 28202-6039**

**S
Hagee, R.L.
2300 One First Union Center
Charlotte, NC 28202-6039**

**T
Mladic, W.G.
400 S. Greenwood Avenue
Clearwater, FL 34616**

**A/S
Burtis, J.M.
2300 One First Union Center
Charlotte, NC 28202-6039**

**A/S
McKinney, R.P.
2300 One First Union Center
Charlotte, NC 28202-6039**

**A/T
Drury, R.E.
2300 One First Union Center
Charlotte, NC 28202-6039**

**A/T
Hassett, J.P.
2300 One First Union Center
Charlotte, NC 28202-6039**

**A/T
Greenfeld, S.D.
2300 One First Union Center
Charlotte, NC 28202-6039**