

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 13, 2000 8:00 am**  
**Secretary of State**

03-13-2000 90012 018 \*\*\*150.00

**DOCUMENT # P04946**

1. Entity Name  
**PROEQUITIES, INC.**

Principal Place of Business <b>2801 HIGHWAY 280 SOUTH          P.O. BOX 518          BIRMINGHAM AL 35223          US</b>	Mailing Address <b>P.O. BOX 518          P.O. BOX 518          BIRMINGHAM AL 35201-0518          US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number <b>63-0879387</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b> Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>BALLARD, MICHEAL B.</b> <b>2801 HWY. 280 SOUTH</b> <b>BIRMINGHAM AL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>BOWEN, MARK</b> <b>2801 HWY 280 S.</b> <b>BHAM AL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PD</b> <b>BRIGGS, ROBERT S.</b> <b>2801 HWY. 280 SOUTH</b> <b>BIRMINGHAM AL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> <b>ALCORN, NANCY C.</b> <b>2801 HYW., 280 SOUTH</b> <b>BIRMINGHAM AL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>PERRY, EDMUNO</b> <b>2801 HWY 280 S.</b> <b>BHAMINGHAM AL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TREASURER</b> <b>DAVID SCHMITT</b> <b>2801 HWY 280 SOUTH</b> <b>BHAM, AL 35223</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: DAVID SCHMITT Date: 3/10/2000 Daytime Phone #: 205-868-3904