

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

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # **P06653** (0)

95 JAN 17 AM 11:40

1. Corporation Name  
**MERCHANDISING EQUIPMENT, INC.**

Principal Place of Business: **820 FAIRBURN ROAD S.W. ATLANTA GA 30331**  
Mailing Address: **820 FAIRBURN ROAD, S.W. ATLANTA GA 30331**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/03/1985**  
3a. Date of Last Report: **03/04/1994**

2. Principal Place of Business  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country  
25. Country

4. FEI Number: **58-0662431**  
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  
**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
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  
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

OFFICE	NAME	STREET ADDRESS	CITY, STATE, ZIP
PD	GRANT, LAWTON E.	P.O. BOX 2529 N/A	CASHIERS NC
STD	GRANT, BETTY R.	P.O. BOX 2529 N/A	CASHIERS NC
VD	GRANT, RICHARD E.	284 SHADOWLAWN ROAD	MARIETTA GA
VD	GRANT, LAWTON K	210 STRANDHILL RD	TYRONE GA
VD	GRANT, ROBERT C	396 SULLIVAN ROAD	NEWNAN GA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICE	NAME	STREET ADDRESS	CITY, STATE, ZIP	Change	Addition
1	President	Lawton K. Grant	210 Strandhill Rd. Tyrone, GA 30290	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	Sec/Vice Pres.	Robert C. Grant	396 Sullivan Rd. Newnan, GA	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	Vice Pres.	Lawton E. Grant	820 Fairburn Rd. Atlanta, GA 30331	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4				<input type="checkbox"/>	<input type="checkbox"/>
5				<input type="checkbox"/>	<input type="checkbox"/>
6				<input type="checkbox"/>	<input type="checkbox"/>
7				<input type="checkbox"/>	<input type="checkbox"/>

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual report, form and accounts and that my signature shall have the same legal effect as if made under oath. That no commission or other fee of the corporation or the receiver or transferee is shown by me into this report as required by Chapter 607, Florida Statutes, and that my name appears on the back of this filing. If I do not appear on an affidavit filed with an address.

SIGNATURE: **Lawton K. Grant, Pres.** Jan. 11, 1995 (404) 696-2466  
DO NOT WRITE BELOW OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR