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CORPORATION ANNUAL REPORT 1995

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

1995 MAR -9 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P07751 (1)

1. Corporation Name

SIX "R" COMMUNICATIONS INCORPORATED

800001426278
-03/10/95--01039--022
*****200.00 *****200.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3005 CHAMBER DRIVE MONORE NC 28110	3005 CHAMBER DRIVE MONORE NC 28110

3. Date Incorporated or Qualified: 10/15/1985
3a. Date of Last Report: 04/07/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23: MONROE NC / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 56-1382026 ☐ 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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☑ Change ☐ Addition
NAME	GRIFFIN, WILLIAM R.	1.2 NAME	
STREET ADDRESS	1100 CHARTER PLACE	1.3 STREET ADDRESS	1100 CHARTER PLACE
CITY-ST-ZIP	MATHEWS NC	1.4 CITY-ST-ZIP	CHARLOTTE NC 28211
TITLE	D	2.1 TITLE	☑ Change ☐ Addition
NAME	TUTTLE, BILLY G.	2.2 NAME	
STREET ADDRESS	2810 ROSEGATE LANE	2.3 STREET ADDRESS	PO Box 2556
CITY-ST-ZIP	CHARLOTTE NC	2.4 CITY-ST-ZIP	MATTHEWS NC 28106
TITLE	D	3.1 TITLE	C ☑ Change ☐ Addition
NAME	FARLEY, WILEY W.	3.2 NAME	
STREET ADDRESS	6931 ROBINSON CHURCH RD.	3.3 STREET ADDRESS	117 BITTER END WAY
CITY-ST-ZIP	CHARLOTTE NC	3.4 CITY-ST-ZIP	PAWLEYS ISLAND SC 29585
TITLE	D	4.1 TITLE	☑ Change ☐ Addition
NAME	CHILDERS, HAROLD E.	4.2 NAME	
STREET ADDRESS	5501 LEBANON RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC	4.4 CITY-ST-ZIP	CHARLOTTE NC 28227
TITLE	D	5.1 TITLE	☑ Change ☐ Addition
NAME	ALBRIGHT, CHARLES B.	5.2 NAME	
STREET ADDRESS	63 HONEYSUCKLE WOODS	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WYLIE SC	5.4 CITY-ST-ZIP	LAKE WYLIE SC 29710
TITLE	P	6.1 TITLE	☑ Change ☐ Addition
NAME	KOONTZ, KENNETH A.	6.2 NAME	
STREET ADDRESS	4521 QUAIL RIDGE DR.	6.3 STREET ADDRESS	191 KEATS RD.
CITY-ST-ZIP	CHARLOTTE NC	6.4 CITY-ST-ZIP	MOORESVILLE NC 28115

DEA 3-9

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)(i), 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: Gerald M Ford GERALD M. FORD CONTROLLER 3/2/95 (704) 289-5422
SIGNATURE AND TYPED OR PRINTED NAME OF BINDING OFFICER OR DIRECTOR — Date — Daytime Phone #

04A84A0 FN