

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **P25884** (8)  
1. Corporation Name  
**APAC-GEORGIA, INC.**



Principal Place of Business: **900 ASHWOOD PKWY STE 700 ATLANTA GA 30338 US**  
Mailing Address: **PO BOX 14000 LEXINGTON KY 40512 US**

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

3. Date Incorporated or Qualified: **09/01/1989**  
3a. Date of Last Report: **04/18/1995**  
4. FEI Number: **58-1401468**  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$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  
660 EAST JEFFERSON STREET  
TALLAHASSEE FL 32301**

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 607.06(2) and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office, principal place of business, 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 firm as well, and accept the obligations of, Section 607.05(5), Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
11.1 NAME: **PD LODGE, CHRISTOPHER B**  DELETED  
11.2 NAME: **ASAT ELLIS, CHARLES D**  DELETED  
11.3 NAME: **WALS, T. CODY**  DELETED  
11.4 NAME: **BATZEL, T.D.**  DELETED  
11.5 NAME: **ASAT STARR, BILL M**  DELETED  
11.6 NAME: **ATS ROBERT E. MEEHAN**  DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
12.1 NAME: **Secretary/Treasurer Onuschak, Peter W.**  Change  Addition  
12.2 NAME: **VP/Assistant Secretary**  Change  Addition  
12.3 NAME: **President/Director**  Change  Addition  
12.4 NAME: **VP/Assistant Secretary Pace, M. Ray**  Change  Addition  
12.5 NAME: **VP/Assistant Secretary Sawran, William R.**  Change  Addition

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 resident or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Part 12 or Part 13 if changed, or on an annual change filing with an address.

SIGNATURE: *Charles A. Ellis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-96  
606/357-7681

CR2E034 (12/95)