

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 569772

(7)

1. Corporation Name:
CMSF, INC.

Principal Place of Business
3550 COLONIAL BLVD
P.O. BOX 209
FORT MYERS FL 33906
US

Mailing Address
577 MULBERRY STREET
P.O. BOX 209
MACON GA 31202-0209

3. Date Incorporated or Qualified
05/09/1978

3a. Date of Last Report
02/02/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	COBERN, JOSEPH M.	<input type="checkbox"/> DELETE
NAME		3414 PEACHTREE ROAD N.E. SUITE 1400	
STREET ADDRESS		ATLANTA GA	
CITY-STATE-ZIP			
TITLE	D	MCRAE, GLENN A	<input checked="" type="checkbox"/> DELETE
NAME		577 MULBERRY ST	
STREET ADDRESS		MACON, GA 00000	
CITY-STATE-ZIP			
TITLE	DV	MCCAULEY, JOHN C	<input checked="" type="checkbox"/> DELETE
NAME		577 MULBERRY ST	
STREET ADDRESS		MACON, GA 00000	
CITY-STATE-ZIP			
TITLE	P	O'SHAUGHNESSY, JON C.	<input checked="" type="checkbox"/> DELETE
NAME		3414 PEACHTREE ROAD, N.E. SUITE 1400	
STREET ADDRESS		ATLANTA GA	
CITY-STATE-ZIP			
TITLE	S	FILUSH, JAMES M	<input type="checkbox"/> DELETE
NAME		577 MULBERRY ST	
STREET ADDRESS		MACON, GA 00000	
CITY-STATE-ZIP			
TITLE	T	SANFORD, CHARLOTTE A	<input type="checkbox"/> DELETE
NAME		3414 PEACHTREE ROAD, NE. SUITE 1400	
STREET ADDRESS		ATLANTA GA	
CITY-STATE-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	D Little, Joseph C
2.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400
2.4 CITY-STATE-ZIP	Atlanta, GA 30326
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	V Everett, Kim
3.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400
3.4 CITY-STATE-ZIP	Atlanta, GA 30326
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	P Bodenbaugh, James R
4.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400
4.4 CITY-STATE-ZIP	Atlanta, GA 30326
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	T/D Sanford, Charlotte A
6.3 STREET ADDRESS	3414 Peachtree Rd., NE Suite 1400
6.4 CITY-STATE-ZIP	Atlanta, GA 30326

14. I do 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 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, changed, or on an attachment with an address.

SIGNATURE:

James M. Filush
James M. Filush
Secretary

1-9-97

(912) 742-1161

Date

CR2E034 (9/96)