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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 814825 (6)

PICERNE DEVELOPMENT CORPORATION OF GEORGIA

Country

Principal Place of Business 577 MULBERRY ST. MACON GA 31202-0779

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Zip

Mailing Address

P.O. BOX 779

2a. Mailing Address

City & State

Zip

26

28

MACON GA 31202-0779

Suite, Apt. #, etc.

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/27/1960

58-0684378

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Zip	Country	Zip	L Co	Country		8. This corporation ov	ves or has paid the cu	rrent year In	tangible		
24	25	29	30			Personal Property			No No		
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
FLECK, JOHN P JR.					Name				ĺ		
1103 PTH AVENUE WEST					Street Ac	Idress (P.O. Box Number is i	Not Acceptable)				
BRADENTON FL 34205					00001710	acces (r.c. cox rember to	(ICC / COOptable)				
_											
								T 79:			
				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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE											
12.		RS AND DIRECTORS	13.	L AUG	a signature rec	<u>`</u>	ES TO OFFICERS ANI	DIRECTOR	3S IN 12		
TITLE	P	DELETE	1.1 7	TIF		7.05111011070737410	LO TO OTTIOLITOTITE	Change	Addition		
NAME	URITESCU, RAYMOND	1.21						_ *	_ [;		
STREET ADDRESS	THE SALE PROPERTY OF				ADDRESS				3		
CITY-ST-ZIP	MACON GA 31210	01.01.04040			T- ZIP				13		
TITLE	V	DELETE	ITLE	- 215			Change	Addition			
NAME	DEHART, MICHAEL							_ *			
STREET ADDRESS	577 MULEBRRY ST				ADDRESS				1		
CITY-ST-ZIP	MACON GA 31210		2,40						\frac{1}{2}		
TITLE	S	☐ DELETE	3.1 7					Change	☐ Addition		
NAME	PICERNE, ROBERT M		3.2 N	AME							
STREET ADDRESS	577 MULBERRY ST		3.3 S	TREET	ADDRESS				1		
CITY-ST-ZIP	MACON GA 31210		3.4. 0	ary-s	T-ZIP						
TITLE	T	DELETE	4.1 TI	TLE				Change	Addition		
NAME	PICERNE, JOHN G		4. 2 N	IAME							
STREET ADDRESS	577 MULBERRY ST		4.3 \$	TREET .	ADDRESS						
CITY - ST - ZIP	MACON GA 31210	4.4 C			- ZIP						
TITLE		DELETE 5.1 T		TLE				Change	Addition		
NAME			5.2 N	AME	ľ				ĺ		
STREET ADDRESS			5.3 \$1	rreet /	ADDRESS						
CITY-ST-ZIP			5.4 C	TY-ST	- ZIP						
TITLE		☐ DELETE	6 1 Tl	TLE				Change	Addition		
NAME			6.2 N	AME							
STREET ADDRESS			6.3 ST	REET	ADDRESS						
CITY-ST-ZIP				TY-ST							
14. 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 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											

Country

indicated on this arrival report of supplemental arrival report is true and create and that my signature shall have the same legal effect as it made under oath; that I am a 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:

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable