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001333

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Feb 23, 1999 8:00 am**  
**Secretary of State**

02-23-1999 90106 018 \*\*\*150.00

DOCUMENT # 815272

1. Corporation Name  
BORAL BRICKS, INC.

Principal Place of Business

ARTHERN ROAD  
AUGUSTA GA 30913  
US

Mailing Address

2859 PACES FERRY ROAD  
SUITE 1520  
ATLANTA GA 30339

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1961

4. FEI Number

58-0349750

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 1630 ARTHURN ROAD

Suite, Apt. #, etc.

22

City & State

23 AUGUSTA, GA

Zip

24 30901

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
S	MCLEAN, ERNEST	2859 PACES FERRY RD., STE. 1520	ATLANTA GA	<input checked="" type="checkbox"/>
CFO	HENLEY, RONALD	500 NORTHRIDGE RD. #300	ATLANTA GA	<input checked="" type="checkbox"/>
VPDA	JONES, STEVEN	2859 PACES FERRY RD. #1520	ATLANTA GA	<input type="checkbox"/>
VP	BROWN, RALPH	1630 ARTHURN RD	AUGUSTA GA	<input type="checkbox"/>
SVPD	MCLEAN, ERNEST	2859 PACES FERRY RD STE 1520	ATLANTA GA	<input type="checkbox"/>
P	BROWN, DENNIS	1630 ARTHURN ROAD	AUGUSTA GA	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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 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, with all other like empowered.

SIGNATURE:

*Donna L. Raines* SIGNATURE REQUIRED *Donna L. Raines*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-99  
Date

770-801-8700  
Daytime Phone #

CR2E034 (1/98)

**BORAL BRICKS INC.**  
**FLORIDA ANNUAL REPORT ATTACHMENT**  
**1999**  
**FEIN: 58-0349750**

T. LEWIS  
2859 PACES FERRY ROAD, SUITE 1520  
ATLANTA, GA 30339