2000 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # 820278 1. Entity Name | | | | | FILED | | | | | |
|---|-----------------------------------|-------------|-------------------------------|---|--|--|---------------------------------|-----------------------------|----------------------------|--|
| GREAT NORTHERN NEKOOSA CORPORATION | | | | | 00 MAR - 9 AM II: 01 | | | | | |
| | | | | | SF | CAETARY (Lantassee | DE STATE | ١. | | |
| Principal Place of Business Mailing Address | | | | | t A E | LAMASSEE. | . PEORIE | 冯 · | | |
| 33 PEACHTREE STREET. N.E. 133 PEACHTREE STREET. N.E. TLANTA GA 30303 ATLANTA GA 30303-1808 | | | | | | | | | | |
| | | | | | | | II III III III II | | | |
| 2. Principal Place of Business 3. Mailing Address | | | <u> </u> | | | | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | DO NOT WRIT | E IN THIS SP | ACE | | |
| City & State | City & State | | | 4. | FEI Number | 01-0082620 | | → | olied For Applicable | |
| Zip Country | Zip Count | | try | 5. | Certificate of | Status Desired | | 8.75 Addi ee Required | | |
| 6. Name and Address of Current Registered Agent | | | Name | 7. | Name and A | ddress of New Re | egistered Ag | ent | _ | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 | | | | dress (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | | | | | | |
| | | | City | Dity | | | FL | Zip Code | | |
| 8. The above named entity submits this statement for the | ne purpose of changing its | registere | ed office or re | egistered a | agent, or both, | in the State of Flo | rida. | | | |
| SIGNATURE | | | | | | | | | | |
| Signature, typed or printed name of registered agent and | title if applicable. (NOTE | . Registere | d Agent signature | тедилей when | n reinstating) | | DATE | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! F After MAY 1, 2000 I Make Check Payable to | | | will be \$550 | 0.00 | 1 | ion Campaign Fina Fund Contribution | | | May Be to Fees | |
| 11. OFFICERS AND DI | | 12. | | | | HANGES TO OFF | | | | |
| TITLE AS NAME FRAZIER, W E III | x | TITLE | I | | rly Dysl Secreta | lin Rountr erv | ee l | Change | Addition | |
| STREET ADDRESS 133 PEACHTREE ST., NE CITY-ST-ZIP ATLANTA GA | | | ET ADDRESS | 133 P | | St., NE | | | | |
| TITLE CD | ☐ Delete | TITLE | E | | - | | , | Change | ☐ Addition | |
| NAME CORRELL, A.D. STREET ADDRESS CITY-ST-ZIP ATLANTA GA | 133 PEACHTREE STREET NE | | EET ADDRESS -ST-ZIP | | ○○○○○31778202 -03/21/0001078011 | | | | | |
| TITLE SVP | ☐ Delete | TITLE | 1 | | | - Protestal I . | ວບ. ມບ | Change | Addition | |
| NAME KHOURY, KENNETH F STREET ADDRESS CITY-ST-ZIP ATLANTA GA | | | ie Eet address St- Zip | | | | | | | |
| TITLE CFO | XX Delete | TITL | | CFO | | | 1 | Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP JOHN F. MCGOVERN 133 PEACHTREE STREET NE ATLANTA GA | 133 PEACHTREE STREET NE | | IE EET ADDRESS '-ST-ZIP | 133 P | anny W. Huff 33 Peachtree St,. NE tlanta. GA 30303 | | | | | |
| TITLE EVP | ☐ Delete | TITLI | 1 | -Hr.Tan | la, GA | | | Change | ☐ Addition | |
| NAME GLASS, DONALD L STREET ADDRESS CITY-ST-ZIP ATLANTA GA | | | EET ADDRESS -ST-ZIP | _ | | | | | | |
| TITLE NAME | ☐ Delete | TITU | | | | | | Change | ☐ Addition | |
| STREET ADDRESS | | STRE | EET ADDRESS '- ST-ZIP | | | | | 6 <i>9 0</i> 52 | | |
| CITY-ST-ZIP 13. I hereby certify that the information supplied with the | nis filing closes not qualify for | | | d in Sectio | on 119.07(3)(i). | Florida Statutes. | I further certif | y that the if | tormation | |
| 13. I hereby certify that the information supplied with the indicated on this report or supplemental report is an of the corporation or the receiver of trustee errors changed, or on an attachment with an address, with the corporation of the receiver of trustee. | | | | | | as it made under o and that my name | oath; that I an e appears in | n an officer Block 11 or | or airector Block 12 if | |
| | Rountree F | | | 2- | 28.00 | Date | 404-65 | 2-4000 time Phone # | | |