

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Mar 11 1996 8:00 am  
Secretary of State

DOCUMENT # 826607 (4)  
1. Corporation Name  
BRAD RAGAN, INC.

Principal Place of Business Mailing Address  
4404 G STUART ANDREW BLVD.  
CHARLOTTE NC 28217 4404 G STUART ANDREW BLVD.  
CHARLOTTE NC 28217



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/11/1971		3a. Date of Last Report 04/19/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 56-0756067		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 officer 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	EOD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROPHEY, W.P.	1.2 NAME	
STREET ADDRESS	5501 SUNNINGDALE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWENS, JIM	2.2 NAME	
STREET ADDRESS	2216 CEDAR BIRD LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE NC	2.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUMBLE, RON	3.2 NAME	
STREET ADDRESS	18712 JOHN CONNOR RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTERVILLE NC	3.4 CITY-ST-ZIP	
TITLE	VPT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARR, RONALD J	4.2 NAME	
STREET ADDRESS	17121 NIBLICK LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTERVILLE NC	4.4 CITY-ST-ZIP	
TITLE	AS <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUNCAN, BARBARA	5.2 NAME	DIRECTOR
STREET ADDRESS	4404 STUART ANDREW BLVD	5.3 STREET ADDRESS	EUGENE R. CULBER
CITY-ST-ZIP	CHARLOTTE NC	5.4 CITY-ST-ZIP	1144 E. MARLBOR ST
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	SORENSEN, R.E.	6.2 NAME	
STREET ADDRESS	501 FOREST HILL DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	BLACKSBURG VA	6.4 CITY-ST-ZIP	

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 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: *Ronald J Carr* V.P. FINANCE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96

Date

(704) 521-2494

Daytime Phone #

CR2E034 (12/95)

BRAD RAGAN, INCORPORATED  
FEIN: 56-0756067

CORPORATE OFFICERS AND DIRECTORS  
As of January 1, 1995

NAME	SSI	OFFICE	DATE OF TAKING OFFICE	ADDRESS
W. P. Brophey	270-32-6009	Chief Executive Officer President	1988	5501 Sunningdale Charlotte, NC 28226
Ron Rumble	375-42-5447	Vice President - Commercial Division	1993	18712 John Connor Rd. Huntersville, NC 28078
Ronald J. Carr	163-36-7251	Vice President - Finance Division	1992	17121 Niblick Lane Huntersville, NC 28078
James E. Owens	258-52-1106	Vice President and General Manager (Retail Division)	1988	2216 Cedar Bird Rd Charlotte, NC 28226
Eugene R. Culler, J311-38-6134		Chairman of the Board Director	1994	1144 E. Market St. Akron, OH 44316
R. E. Sorensen	104-32-0557	Director	1977	501 Forest Hill Drive Blacksburg, VA 24060
R. D. Pearson	277-30-1364	Director	1978	567 Commerce Street Franklin Lanes, NJ 07417
Charles A. Bethel	447-26-7168	Director	1983	3212 Bernuda Village Advance, NC 27006