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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

827309 DOCUMENT #

(6)

R.H. BOULIGNY INC. Mailing Address Principal Place of Business 2320 N. DAVIDSON ST 2320 N. DAVIDSON ST PO BOX 5465 PO ROX 5465 CHARLOTTE NC 28225-5485 CHARLOTTE NC 28225 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 01/13/1972 2. Princ-pal Place of Business 4. FEI Number Applied For 2a. Mailing Address 56-0999794 Not Applicable 26 21 Suite. Apt. #. etc. \$8.75 Additional Suite Apt. # etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Country Zip Yes No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DATE (NOTE Registered Agent s gnature required when reinstating) Signature, typed or printed name of registered agent and tille if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change Addition X DELETE President 1.1 TITLE TITLE RICHARD E. BENNION Michael D Cooper 1.2 NAME NAME 7501 SETON HOUSE LANE 1.3 STREET ADDRESS 1239 Torrence Circle STREET ADDRESS CHARLOTTE NC 1.4 CITY - ST-ZIP Davidson NC 28036 CITY - ST- 70 Addition Assistant Secretary Floyd A. Cornett Jr. Change DELETE 2.1 TITLE THILE 2.2 NAME NAME Route 4, Box 703 2.3 STREET ADDRESS STREET ADDRESS Wytheville VA 24382 2.4 CITY-ST-ZIP City-St-ZiP Change Addition ☐ DELETE 3.1 TITLE THEF 3.2 NAME NAME 3 3 STREET ADDRESS STREET ACORESS 34. CITY-ST-ZIP CHTY-51 Addition DELETE 4 1 TITLE TILLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-2IP CITY ST-ZIP Change Addition DELETE 5.1 TITLE THEF 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CHY-S1 ZIP Change Addition DELETE 6.1 THLE THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do ne oby 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.

CITY-ST-20F

3-25-97

704-372-8720

FILED

Apr 01 1997 8:00am

Secretary of State

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