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Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 830005 (5)

1. Corporation Name
HARRIS & WILEMON SALVAGE COMPANY, INC.

Principal Place of Business

7278 SELKIRK DRIVE. NW
ATLANTA GA 30328

Mailing Address

7278 SELKIRK DRIVE. NW
ATLANTA GA 30328-1344

3. Date Incorporated or Qualified
04/30/1973

3a. Date of Last Report
01/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

58-1158818

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

WILEMON, ROYCE D.
2543 POWERS AVENUE
HARRIS & WILEMON SALVAGE CO INC.
JACKSONVILLE FL 32207

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 of the person who is the registered agent and file if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P HARRIS, REEFAS W. DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
7278 SELKIRK DR NW
ATLANTA GA

TITLE V WILEMON, ROYCE D. DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
1958 EVENTIDE RD
JACKSONVILLE FL

TITLE S HARRIS, ARLEEN F. DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
7278 SELKIRK DR NW
ATLANTA GA

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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 Change Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP Change Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP Change Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP Change Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP Change Addition

14. I do 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.

SIGNATURE:

Arleen F. Harris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-97

Date

770-394-1050

Daytime Phone #

0011934

CR2E034 (9/96)