FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 JAN 27 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 834107 (5)

1. Corporation Name

HEERY INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
999 PEACHTREE ST..N.E. ATLANTA GA 30367-5401	999 PEACHTREE ST..N.E. ATLANTA GA 30367-5401

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/02/1975

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 Country — 25

Zip — 29 Country — 30

4. FEI Number: 58-0827945 ☐ 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

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	☐ Change ☐ Addition
NAME	BRENER, JOSHUA L.	1.2 NAME	Delete
STREET ADDRESS	965 IVY FALLS DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30328	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	V ☐ Change ☒ Addition
NAME	MOYNIHAN, JAMES J.	2.2 NAME	J. Anthony Gaydon
STREET ADDRESS	999 PEACHTREE ST NE	2.3 STREET ADDRESS	4624 Lehigh Dr.
CITY-ST-ZIP	ATLANTA GA 30309	2.4 CITY-ST-ZIP	Marietta, GA 30067
TITLE	S	3.1 TITLE	V ☐ Change ☒ Addition
NAME	NIKONOVICH-KAHN, R.	3.2 NAME	William E. Heitz
STREET ADDRESS	1922 COLLAND DR., SW	3.3 STREET ADDRESS	3833 Beatty Rd.
CITY-ST-ZIP	ATLANTA GA 30318	3.4 CITY-ST-ZIP	Monkton, MD 21111
TITLE	VT	4.1 TITLE	V ☐ Change ☒ Addition
NAME	HILL, JOHN P., JR.	4.2 NAME	Gregory H. Peirce
STREET ADDRESS	1013 LENOX VALLEY	4.3 STREET ADDRESS	4311 Raintree Lane
CITY-ST-ZIP	ATLANTA GA 30324	4.4 CITY-ST-ZIP	Atlanta, GA 30327
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	HARRIS, JOSEPH M.	5.2 NAME	Delete
STREET ADDRESS	4544 PEACHTREE DUNWOODY	5.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30342	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	$89 1131
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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 X in Block.

SIGNATURE: R Nikonovich-Kahn 1-18-95 404/881-9880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0396806 FP