2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 09, 2001 8:00 am Secretary of State **DOCUMENT # 834107** 1. Entity Name HEERY INTERNATIONAL, INC. 02-09-2001 90236 001 ***158.75 Principal Place of Business Mailing Address 999 PEACHTREE ST., N.E. 999 PEACHTREE ST..N.E. ATLANTA GA 30309 ATLANTA GA 30309 $\Pi\Pi\Pi\Pi\Pi\Pi$ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-0827945 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -----6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GAYDON, J. ANTHONY NAME STREET ADDRESS 4624 LEHIGH DR STREET ADDRESS CITY-ST-ZIP MARIETTA GA 30067 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition MOYNIHAN, JAMES J NAME NAME STREET ADDRESS 999 PEACHTREE ST NE STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30309 CITY-ST-ZIP TITLE. ___ Delete TITLE ☐ Change ☐ Addition NIKONOVICH-KAHN, R NAME NAME STREET ADDRESS 1922 COLLAND DR., SW STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30318 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HILL, JOHN P JR NAME NAME STREET ADDRESS 1013 LENOX VALLEY STREET ADDRESS CITY-ST-ZIP ATLANTA GA CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME HEITZ, WILLIAM E NAME STREET ADDRESS 3833 BEATTY RD STREET ADDRESS CITY-ST-ZIP MONKTON MD CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME PEIRCE, GREGORY H NAME

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with a state of the corporation of the receiver of trustee empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

4311 RAINTREE LANE

ATLANTA GA 30327

STREET ADDRESS

Richard Nikonovich-Kahn 2.2.01 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF