

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 837237 (7)

1. Corporation Name

SUNSTATES MANAGEMENT COMPANY



Principal Place of Business

Mailing Address

4600 MARRIOTT DRIVE, SUITE 200  
PO BOX 30043  
RALEIGH NC 27622

4600 MARRIOTT DRIVE, SUITE 200  
PO BOX 30043  
RALEIGH NC 27622

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/21/1976

3a. Date of Last Report

02/20/1995

4. FEI Number

56-1143293

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

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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 typed or printed name of registered agent and date and address

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE S  
NAME PAYNE, CLAIR K  
STREET ADDRESS 4600 MARRIOTT DRIVE  
CITY-STATE-ZIP RALEIGH, NC 0

TITLE D  
NAME MORTENSON, LEE N  
STREET ADDRESS 55 E MONROE ST  
CITY-STATE-ZIP CHICAGO IL

TITLE TD  
NAME KENNEDY, GLENN J.  
STREET ADDRESS 4600 MARRIOTT DRIVE  
CITY-STATE-ZIP RALEIGH, NC 0

TITLE AS  
NAME BUTTS, ALICE G  
STREET ADDRESS 4600 MARRIOTT DRIVE  
CITY-STATE-ZIP RALEIGH, NC 0

TITLE PD  
NAME LEONARD, RICHARD A.  
STREET ADDRESS 4600 MARRIOTT DRIVE  
CITY-STATE-ZIP RALEIGH, NC 0

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-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:

*Richard A. Leonard, Pres.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 16, 1996 (919) 781-5611

Date

Daytime Phone #

CR2E034 (12/95)