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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 838946 1. Corporation Name

HARRINGTON, GEORGE AND DUNN, P.C.

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90027 003 ***150.00

|--|--|--|

Principal Place	e of Business	Mailing	Address						() 6 161(
1401 PEACHTRE	EE ST NE. #120	1401 PE	ACHTREE ST NE	. #120							`
ATLANTA GA 30309 ATLANTA GA 30309						DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed				
					,		08/12/1977				
2 Principal Pl	ace of Business	2a. Mai	ling Address			_	4. FEI Number		\top	App	lied For
21	doc of Business	26					58-1252871			Not	Applicable
Suite, Apt.	#, etc.		e, Apt. #, etc.				5. Certifcate of Status Desired		\$8.	75 Ac	Iditional
22		27					5. Certificate of Status Desired	<u></u>	Fe	e Req	uired
City & State	e	City	& State				6. Election Campaign Financing	П			May Be
23		28					Trust Fund Contribution			ded to	Fees
Zip	Country	Zip			intry		_ 8This corporation owes the curr			г	, ` ⊒N-
24	25	29		30	_		Personal Property Tax.		Yes		□No
}	9. Name and Address of Current	Registered	d Agent		81	Name	10. Name and Address of New F	registered A	igent		
GEO	RGE, BERNARD				0						
	LAKE JEFFREY ROAD				82	Street Addre	ess (P.O. Box Number is Not Accepta	able)			
	CITY FL 32055				83						
	011112 02000				"						
ĺ					84	City		Fi	85	Zip Co	ode
11.5	to the provisions of Sections 607.0502	2 and 607 16	OR Florida Stat	utee the s	hove	-named come	oration submits this statement for the	purpose of o	hangir	na its r	egistered
l office or n	egistered agent, or both, in the State (nt Florida, Si	uch change was	autnorize	o ov	tne corporatio	n's board of directors. I hereby accep	t the appoin	tment.	as regi	istered
agent. I a	m familiar with, and accept the obligat	ions of, Sec	tion 607.0505, F	iorida Stai	niéz						
SIGNATURE	Signature, typed or printed name of registered agent	and title if appli	cable. (NO	TE: Registere	1 Ager	nt signature required	when reinstating)	DATE			
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRE	CTOF	
TITLE	D		DELETE	1.1 T	TLE				☐ Ch	∍nge	☐ Addition
NAME	GEORGE, ANTHONY, JR.			1.2 N	AME						
STREET ADDRESS	1401 PEACHTREE ST NE			1.3 S	TREET	ADDRESS					
CITY-ST-ZIP	ATLANTA GA			1.4.0	ITY-S	T-ZIP			r=3.01		- A 1500 c
TITLE	P		☐ DELETE	2.1 T	ITLE				Chi	ange	☐ Addition
NAME	DUNN III, WILLIAM A.			2.2 N	AME						
STREET ADDRESS	1401 PEACHTREE STREET NE			2.3 S	TREET	T ADDRESS					
CITY-ST-ZIP	ATLANTA GA					ST-ZIP_			m ch		☐ Addition
TITLE			☐ DELETE	3.1 T					☐ Cha	ange	Addition
NAME .		**		3.2 N		- ~ ·	به المحمد درید. _{در ا} ی بی <u>نس</u> ی	- ·· -			
STREET ADDRESS				1		TADDRESS					
CITY-ST-ZIP			DELETE	3.4. (4.1 T		ST-ZIP			[] Ch	ange	Addition
TITLE			□ nere (E		VAME	Ì				•	
NAME						TADDRESS					
STREET ADDRESS	-										
CITY-ST-ZIP			DELETE	5.1 T	ITY-S ITLE	1-217			☐ Ch	ange	☐ Addition
NAME					AME				-		
						T ADDRESS					
STREET ADDRESS						T-ZIP					
CITY-ST-ZIP TITLE	_		DELETE	6.1 T				_	☐ Ch	ange	☐ Addition
NAME				6.21	IAME						
STREET ADDRESS				6.3 \$	TREE	TADDRESS					
SINEE! ADDRESS				- 1		T-ZIP					

14. 1 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR