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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 840055

JAMES M. VARDAMAN, & CO., INC.

(8)

FILED Apr 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						E 160101 (Brit, 61011 BAHL DDIG1 BILBI AHL 6161	E DEDIGE SEISE MINES BESSE ODERS BEEST AND MINES BEDES MENT MINES AND STATE OF THE		
120 N CONG	ress st	PO BOX 22766	PO BOX 22766						
SUITE 630		JACKSON MS 39225							
JACKSON MS	39201						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 02/17/1978			
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				64-0477539	١	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27				Contribute of States Desired	Fee F	Required	
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be			
23	28					Trust Fund Contribution	Added	to Fees	
Zip	Country	Ζιρ		ıntry		8. This corporation owes or has paid the		— ·	
24	25	29	30			Personal Property Tax due June 30.		∐ No	
	9. Name and Address of Curren	t Registered Agent		421	 	10. Name and Address of New Register	ed Agent		
	LER, WILTON			81	Name			ŀ	
201 S. MONROE ST. STE-500				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
TAI	LAHASSEE FL 32301					` <u>'</u>			
				83					
				84	City		- 85 Zip	Code	
44.5	10 40 007 000	0 - 1003 4500 Ft - 1 Bi	- 4	Ш			L B		
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									
					nt signature re	equired when reinstating) DAT		70 (1) 40	
12.	C OFFICERS AIN	DELETE	13. 1.1 TI	t) F		ADDITIONS/CHANGES TO OFFICERS	Change	Addition	
	VARDAMAN, JAMES M.	□ otten	1.2 NAME		1	,	change	L. Addison	
NAME	EARS FADMOWODTU								
STREET ADDRESS	MACKGON MG		1		ADDRESS				
CITY-ST-ZIP	T T	DELETE		IY-SI	-ZIP		Change	Addition	
TITLE	DAVIS, BOBBYE	DE TYCLES			L		reside	Addition	
NAME	SE DOLE DOLOGE OD		2.2 N/			TOM EXBAUM			
STREET ADDRESS		DANDON ME			ADDRESS	120 N. Congress			
CITY-ST-ZIP			_	ITY-S	T-ZIP	THERSON MS 54213			
TIFLE	S DELETE 311				Same an	Change	☐ Addition		
NAME	DAVIS, BOBBYE		3.2 N/	AME		Same as Abone		l	
STREET ADDRESS	155 POLE BRIDGE DR		3.3 STREET		address	NDON		l	
CITY-ST-ZIP	BRANDON MS		3.4. C	ITY - SI	T- Z IP				
TITLE	VP	DELETE	4.1 70	TLE			Change	Addition	
NAME	TETER, PAUL D		4. 2 N	AME				l	
STREET ADDRESS	1703 GARY AVE.		4.3 \$1	TREET A	ADDRESS			l	
CITY-ST-ZIP	ALBANY GA		4.4 C	TY-ST	- ZIP				
TITLE	VP	DELETE	5.1 Ti	TLE			Change	☐ Addition	
NAME	TETER, PAUL D.		5.2 NA	AME				ŀ	
STREET ADDRESS	1703 GARY AVE.		5.3 ST	REET A	ADDRESS			ŀ	
CITY-ST-ZIP	ALBANY GA		5.4 Ci	TY-ST	- ZIP				
TITLE		DELETE	6.1 TI				☐ Change	Addition	
NAME			6.2 NA	AME				1	
STREET ADDRESS					ADDRESS			1	

14. Thereby 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 trusty employed 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. JOM EKBAUM