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

PROFIT ' CORPORATION ANNUAL REPORT 1998 DOCUMENT #
1. Corporation Name

ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(8)

FILED May 21 1998 8:00am Secretary of State

ALEXAN	nder underwriters, in	C.					
Principal Place	e of Businoss	Mailing Address				NI DIQUE DEBEL QUDIL QUBLE BUDEL UDBI	
2910 MILLER ROAD 2910 MILLER							
P.O.BOX 105051 (ATLANTA.GA.) P.O.BOX 105051 (ATLA			ANTA,GA.)				
DECATUR GA	30035	DECATUR GA 30035				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified		
O Delevious Di	land O	1 6- 11-11 Address			10/06/1978		
2. Principal Place of Business		- 1 · · · · · · · · · · · · · · · · · ·	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.			Surte, Ap1 #, etc.		58-1491855	Not Applicable \$8.75 Additional	
22			27]		5. Certificate of Status Desired	Fee Regulred	
City & State	3		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		26		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Count	у	8. This corporation owes or has paid to		
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regist	ered Agent	
LO	RENZ, KARL K. JR.		8	1 Name	Betty Jayne Hotaling		
27 EAST ROBINSON ST			8	Street An	Street Address (P.O. Box Number is Not Acceptable) 27 East Robinson Street		
ORLANDO FL 32801			ľ	Directine			
	-		8	3			
			8	1 0:::		ar Zin Codo	
				1 ' '	Orlando proporation submits this statement for the purporation's board of directors. I hereby accept the	FL 85 Zip Code 32801	
SIGNATURE	Signature typed of professional or of respectation and	ás.			quired when reinstating) ADDITIONS/CHANGES TO OFFICER.	5/13/98	
TITLE	PD	DELETE	1.1 TITLE	(Chairman of Board	Change Addition	
NAME	ALEXANDER, JAMES A.		1.2 NAME		Alexander, James A.		
STREET ADDRESS	\$240 GLENCREE NW		1.3 \$7RE		3240 Glenoree NW		
CITY-ST-ZIP	LITHONIA GA		1.4 CITY	S1-ZIP	_ithonia, GA		
TITLE	VS D	₹ DELETE	2.1 TITLE		PD	Change X Addition	
NAME	ALEXANDER, FARRIS A.		2.2 NAMI		Tufts, Steven D.		
STREET ADDRESS	3240 GLENCREE, NW		23 STRE	T ADDRESS 2	2440 Sugarloaf Club Driv	e	
CITY-ST-ZIP	LÍTHONIA GA		2. 4 CITY		Duluth, GA 30097		
TITLE	VID	DELETE	31 TITLE		SVPTD	Change Addition	
NAME	ALEXANDER, C. GLENN		3.2 NAM6		Stoner, Donald J.		
STREET ADDRESS	4476 FREEMAN COURT			TADDRESS	324 Hambledon Walk Alpharetta, GA 30022		
CITY-ST-ZIP	NORCROSS GA	T DECEN	3.4. CITY	-ST-ZIP	Alpharetta, GA 30022	Change Addition	
THLEA		DELETE	4.1 TITLE	1 .	5	Change Addition	
NAME	•		4. 2 NAM		Hillis, Juanita S.		
STREET ADDRESS				T ADDRESS	3219 U. S. Hwy 78, S. W.		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5.1 TITLE	SI-ZIP	oganville, GA 30052	Change Addition	
NAME		C. Decert	5.2 NAME	}		El ousside El violation	
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			5.4 CHY-	1			
TITLE		DELETE	6.1 TITLE	01-11		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			6.4 CITY				
14. I hereby o	ertify that the information supplied i	with this filing does not quali	fy for the exem	ption stated	in Section 119.07(3)(i), Florida Statutes. I furti	ner certify that the information	
indicated officer or o	on this annual report or supplement	lat annual report is true and :civer or trustee empo wered	accurate and t	hal my signa	iture shall have the same legal effect as if ma equired by Chapter 607, Florida Statutes; and	de under oath; that I am an	