

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **844409** (3)
1. Corporation Name
THE LANDMARKS GROUP PROPERTIES CORPORATION



Principal Place of Business: **5 CONCOURSE PKWY STE 2000 ATLANTA GA 30328-5346 US**
Mailing Address: **121 W. TRADE ST., SUITE 1900 ATTN: LEGAL DEPT. CHARLOTTE NC 28202**

3. Date Incorporated or Qualified: **10/22/1979**
3a. Date of Last Report: **09/21/1995**
4. FEI Number: **58-1288846**
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

2. Principal Place of Business: **21 121 W. Trade St**
22 **Suite 1900 Attn: Legal Dept.**
23 **Charlotte NC**
24 **Zip 28202**
25 **Country Mecklenburg**
2a. Mailing Address: **26 ~~121 W Trade St.~~**
27 **Suite 1900 Attn: Legal Dept.**
28 **Charlotte NC**
29 **Zip 28202**
30 **Country Mecklenburg**

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

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: _____ (NOTE: Registered Agent signature required when restating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	FAISON, HENRY J	
STREET ADDRESS	121 W. TRADE ST. SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	NORWOOD, PHILIP W	
STREET ADDRESS	121 W. TRADE ST. SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202	
TITLE	VTS	<input type="checkbox"/> DELETE
NAME	WHITAKER, BILLIE R	
STREET ADDRESS	121 W TRADE ST. SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LIPTAK, ROBERT	
STREET ADDRESS	121 W TRADE ST. SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	SPEED, ELIZABETH M	
STREET ADDRESS	121 W TRADE ST. SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-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: **ELIZABETH M. SPEED**
Date: **1-15-96** Daytime Phone #: **704 331 2524**

CR2E034 (12/95)