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Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 846713 (6)

1. Corporation Name
PIEDMONT OLSEN HENSLEY, INC.

Principal Place of Business

420 EAST PARK AVENUE
P.O. BOX 1717
GREENVILLE SC 29602

Mailing Address

~~P.O. BOX 1717~~
~~P.O. BOX 1717~~
~~GREENVILLE SC 29602-1717~~
~~US~~



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 C/O Geraghty+Miller, Inc.

27 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified
08/13/1980

3a. Date of Last Report
04/01/1996

4. FEI Number

57-0373224

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
BOYETTE, JOHN V JR
STREET ADDRESS
122 HILLSBOROUGH DR
CITY-ST-ZIP
GREENVILLE SC

TITLE ☐ DELETE

NAME
SVS
TUCKER, C. A
STREET ADDRESS
4 HIDDEN HILLS COURT
CITY-ST-ZIP
GREENVILLE SC

TITLE ☐ DELETE

NAME
EV
SKINNER, J. T
STREET ADDRESS
120 LAUREL OAK TRAIL
CITY-ST-ZIP
SIMPSONVILLE SC

TITLE ☐ DELETE

NAME
EV
ZIMMERMAN, J. L JR
STREET ADDRESS
103 PARKVIEW CIRCLE
CITY-ST-ZIP
CARY NC

TITLE ☐ DELETE

NAME
PD
HASTEY J.A.
STREET ADDRESS
895 EDGEWATER DR.
CITY-ST-ZIP
ATLANTA GA

TITLE ☒ DELETE

NAME
VT
PIERCE, C P
STREET ADDRESS
214 CHATEAU DR.
CITY-ST-ZIP
GREENVILLE SC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

C/O
1.2 NAME
Steven B. Blake
1.3 STREET ADDRESS
1099 18th St., Ste. 2100
1.4 CITY-ST-ZIP
Denver, CO 80202

2.1 TITLE ☐ Change ☒ Addition

D
2.2 NAME
John J. Chouinard
2.3 STREET ADDRESS
1099 18th St., Ste. 2100
2.4 CITY-ST-ZIP
Denver, CO 80202

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition


5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 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 an attachment with an address.

SIGNATURE:

 Joe A. Hastey

4-1-97

303/391-8282

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0010820

CR2E034 (9/96)