

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90325 001 ***150.00

DOCUMENT # 847470

1. Corporation Name

FIRST FINANCIAL MANAGEMENT CORPORATION OF GEORGIA
A

Principal Place of Business

5660 NEW NORTHSIDE DRIVE
SUITE 1400
ATLANTA GA 30328
US

Mailing Address

5660 NEW NORTHSIDE DRIVE
SUITE 1400
ATLANTA GA 30328
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/1980

4. FEI Number

58-1107864

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
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

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

SECT

☒ DELETE

NAME

PITTARD, M. TARLTON

STREET ADDRESS

3 CORPORATE SQUARE #700

CITY-ST-ZIP

ATLANTA GA

TITLE

EVP

☒ DELETE

NAME

WOMACK, H. PAUL

STREET ADDRESS

3 CORPORATE SQUARE #700

CITY-ST-ZIP

ATLANTA GA

TITLE

VAS

☒ DELETE

NAME

BURT, BARRY W.

STREET ADDRESS

3 CORPORATE SQUARE #700

CITY-ST-ZIP

ATLANTA GA

TITLE

EVP

☒ DELETE

NAME

HUTTO, RANDOLPH L

STREET ADDRESS

3 CORPORATE SQUARE, STE. 700

CITY-ST-ZIP

ATLANTA GA

TITLE

CP

☒ DELETE

NAME

THOMAS, PATRICK H.

STREET ADDRESS

3 CORPORATE SQUARE #700

CITY-ST-ZIP

ATLANTA GA

TITLE

D

☒ DELETE

NAME

COHEN, GEORGE C.

STREET ADDRESS

3100 FIRST ATLANTA TOWER

CITY-ST-ZIP

ATLANTA GA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P/O

☐ Change ☒ Addition

1.2 NAME

Charles T. Fote

1.3 STREET ADDRESS

6200 South Quebec Street

1.4 CITY-ST-ZIP

Englewood - CO - 80111

2.1 TITLE

T

☐ Change ☒ Addition

2.2 NAME

Mark E. Young

2.3 STREET ADDRESS

5660 New Northside Drive, Suite 1400

2.4 CITY-ST-ZIP

Atlanta, GA 30328

3.1 TITLE

UPSID

☐ Change ☒ Addition

3.2 NAME

Michael T. Whealy

3.3 STREET ADDRESS

5660 New Northside Drive, Suite 1400

3.4 CITY-ST-ZIP

Atlanta, GA 30328

4.1 TITLE

AT

☐ Change ☒ Addition

4.2 NAME

Jerry P. Dembowski

4.3 STREET ADDRESS

5660 New Northside Drive, Suite 1400

4.4 CITY-ST-ZIP

Atlanta GA 30328

5.1 TITLE

EVP

☐ Change ☒ Addition

5.2 NAME

Robert J. Levenson

5.3 STREET ADDRESS

401 Hackensack Avenue

5.4 CITY-ST-ZIP

Hackensack, NJ 07601

6.1 TITLE

AT

☐ Change ☒ Addition

6.2 NAME

Bernard Rothman

6.3 STREET ADDRESS

5660 New Northside Drive, Suite 1400

6.4 CITY-ST-ZIP

Atlanta, GA 30328

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED

JERRY P. DEMBOWSKI
ASSISTANT TREASURER

Date

4/6/99

Daytime Phone #

(770) 857-7248

CR2E034 (11/98)