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CORPORATION ANNUAL REPORT 1995

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 9:09

DOCUMENT # 848718 (3)

1. Corporation Name
WILMA COLONY INVESTMENTS, INC.

Principal Place of Business	Mailing Address
780 JOHNSON FERRY RD. SUITE 300 ATLANTA GA 30342	780 JOHNSON FERRY RD. SUITE 300 ATLANTA GA 30342

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/02/1981	3a. Date of Last Report: 02/24/1994
4. FEI Number: 58-1434432	☐ 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	2a. Mailing Address
21 780 Johnson Ferry Rd.	26 780 Johnson Ferry Road
Suite, Apt. #, etc. 22 Suite 250	Suite, Apt. #, etc. 27 Suite 250
City & State 23 Atlanta, GA	City & State 28 Atlanta, GA
Zip 24 30342	Country 25 USA
Zip 29 30342	Country 30 USA

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	ADDRESS CHANGE ☒ Change ☐ Addition
NAME	GRAHAM, CHARLES D.	12 NAME	Charles D. Graham	
STREET ADDRESS	780 JOHNSON FERRY RD 300	13 STREET ADDRESS	780 Johnson Ferry Road, Suite 250	
CITY-ST-ZIP	ATLANTA, GA 00000	14 CITY-ST-ZIP	Atlanta, GA 30342	
TITLE	V	21 TITLE	V	☒ Change ☐ Addition
NAME	BEAVERS, BOB	22 NAME	Bob Beavers	
STREET ADDRESS	780 JOHNSON FERRY RD 300	23 STREET ADDRESS	780 Johnson Ferry Road, Suite 250	
CITY-ST-ZIP	ATLANTA, GA 00000	24 CITY-ST-ZIP	Atlanta, GA 30342	
TITLE	T	31 TITLE	S	☒ Change ☐ Addition
NAME	ALLEN, BONA K.	32 NAME	Mary Ellen Leonard	
STREET ADDRESS	780 JOHNSON FERRY RD 300	33 STREET ADDRESS	780 Johnson Ferry Rd., Suite 250	
CITY-ST-ZIP	ATLANTA, GA 00000	34 CITY-ST-ZIP	Atlanta, GA 30342	
TITLE	S	41 TITLE	V	☐ Change ☒ Addition
NAME	LEONARD, MARY ELLEN	42 NAME	Susan J. Marsh	
STREET ADDRESS	780 JOHNSON FERRY RD 300	43 STREET ADDRESS	780 Johnson Ferry Road, Suite 250	
CITY-ST-ZIP	ATLANTA GA	44 CITY-ST-ZIP	Atlanta, GA 30342	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this report is true and complete and that I am not guilty of the exceptions listed 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 complete 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 added, above with an address.

SIGNATURE: Mary Ellen Leonard 404-252-0070
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL DATE DAYTIME PHONE NUMBER

0003330 CP