

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 25 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 849133

(4)

1. Corporation Name

ELRICK AND LAVIDGE, INC.

Principal Place of Business

**1800 PEACHTREE ST., N.W.
P.O. BOX 4081
ATLANTA GA 30309**

Mailing Address

**1800 PEACHTREE ST., N.W.
P.O. BOX 4081
ATLANTA GA 30309**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/14/1981

3a. Date of Last Report

05/01/1994

4. FEI Number

36-2204664

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. 189.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**P
MCWEY, J.C.
1425 SARATOGA DR
ALPHARETTA GA**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

**J.C. MCWEY
9085 Nesbit Lakes
Alpharetta, Georgia**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**T
HAYGOOD, RALPH F.
1490 DANSFORD CT
MARIETTA GA**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**AVP
STAGMEIER, JOHN H.
2170 NORTHFIELD CT N.E.
MARIETTA GA**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**VC
DAWSON, JOSEPH E
3540 TOWNSHIP VALLEY CT.
MARIETTA GA**

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**C
ROGERS, C.B. JR.
2880 PEACHTREE DR
ATLANTA GA**

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**S
MAGIS, THOMAS H.
7235 DUNCOURTNEY DR.
SANDY SPRING GA**

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(b), 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:

John H. Stagmeier

John H. Stagmeier

04/20/95

404-885-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

849133

ELRICK & LAVIDGE, INC.

1600 Peachtree Street, N.W.
Atlanta, Georgia 30309

OFFICERS

TITLE/POSITION	NAME	RESIDENTIAL ADDRESS
CHAIRMAN	Clarence B. Rogers, Jr.	2660 Peachtree Road, Atlanta, Georgia
VICE CHAIRMAN	Dan W. McGlaughlin	3430 Tuxedo Road, Atlanta, Georgia
SR. VICE PRESIDENT	James O. Perkins	950 Tiverton Lane, Alpharetta, Georgia
PRESIDENT	Jeffrey C. McWay	9085 Nesbit Lakes Drive, Alpharetta, Georgia
SECRETARY	Thomas H. Magis	7235 Duncourtney Drive, Atlanta, Georgia
ASST. SECRETARY	Joan A. Martin	2224 Riada Drive, Atlanta, Georgia
TREASURER	Ralph F. Haygood	1490 Dansford Court, Marietta, Georgia
ASST. TREASURER	Michael S. Shannon	121 Kirk Crossing, Decatur, Georgia

DIRECTORS

NAME	RESIDENTIAL ADDRESS
Clarence B. Rogers, Jr.	2660 Peachtree Road, Atlanta, Georgia
Dan W. McGlaughlin	3430 Tuxedo Road, Atlanta, Georgia
Donald U. Haliman	2244 Spencer's Way, Stone Mountain, Georgia

ALL OFFICERS AND DIRECTORS WERE ELECTED TO THEIR POSITIONS IN APRIL 1995