

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 # 851678 (3)
1. Corporation Name
AMERICAN BUILDING MAINTENANCE CO. OF GEORGIA



Principal Place of Business Mailing Address
50 FREMONT ST., 4TH FLOOR 50 FREMONT ST., 4TH FLOOR
SAN FRANCISCO CA 94105 SAN FRANCISCO CA 94105

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/25/1982		3a. Date of Last Report 04/18/1995	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 58-0949708		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

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
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	S	<input type="checkbox"/> DELETE
NAME	KAHN, HARRY H.	
STREET ADDRESS	50 FREMONT ST. 4TH FLOOR	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	T	<input type="checkbox"/> DELETE
NAME	BOWLUS, DOUGLAS B.	
STREET ADDRESS	50 FREMONT ST. 4TH FLOOR	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	P	<input type="checkbox"/> DELETE
NAME	EGAN, JOHN F.	
STREET ADDRESS	50 FREMONT ST. 4TH FLOOR	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	ROSENBERG, SYDNEY J.	
STREET ADDRESS	9831 W. PICO BLVD.	
CITY-ST-ZIP	LOS ANGELES CA 90035	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	STEELE, WILLIAM W.	
STREET ADDRESS	50 FREMONT ST 4TH FL	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	V	<input type="checkbox"/> DELETE
NAME	NEUFELDT, WALLACE E.	
STREET ADDRESS	3404 OAKCLIFF RD C-3	
CITY-ST-ZIP	ATLANTA GA 30360	

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: *X Douglas B Bowlus*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4-23-96

Date

(415) 597-4500

Daytime Phone #

CR2E034 (12/95)