

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **852729** (3)  
1. Corporation Name  
**MOLTON, ALLEN & WILLIAMS CORPORATION OF ALABAMA**

Principal Place of Business <b>1000 URBAN CENTER DRIVE BOX 10025 BIRMINGHAM AL 35202 US</b>	Mailing Address <b>1000 URBAN CENTER DRIVE BOX 10025 BIRMINGHAM AL 35202 US</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**04/28/1982**

4. FEI Number <b>63-0823634</b>	Applied For <input type="checkbox"/> Not Applicable
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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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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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
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 reinstalling)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	V
NAME	KULOVITZ, LOUIS E, JR
STREET ADDRESS	1000 URBAN CENTER PKWY
CITY-ST-ZIP	BIRMINGHAM AL 35202
TITLE	D
NAME	WILLIAMS, C MOLTON
STREET ADDRESS	1000 URBAN CENTER PKWY
CITY-ST-ZIP	BIRMINGHAM AL 35202
TITLE	S
NAME	CROWE, BETTY H.
STREET ADDRESS	1000 URBAN CENTER PKWY
CITY-ST-ZIP	BIRMINGHAM AL 35202
TITLE	D
NAME	SIMPSON, CHARLES H.
STREET ADDRESS	1000 URBAN CENTER PKWY
CITY-ST-ZIP	BIRMINGHAM AL 35202
TITLE	D
NAME	JERNIGAN, W. CARL
STREET ADDRESS	1000 URBAN CENTER PKWY
CITY-ST-ZIP	BIRMINGHAM AL 35202
TITLE	D
NAME	WILLIAMS, JOHN W.
STREET ADDRESS	1000 URBAN CENTER PKWY
CITY-ST-ZIP	BIRMINGHAM AL 35202

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	SENIOR VICE-PRESIDENT
1.2 NAME	DAVID A. HARRIS
1.3 STREET ADDRESS	1000 URBAN CENTER DRIVE
1.4 CITY-ST-ZIP	BIRMINGHAM, AL 35242
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE:

*David A. Harris*

2-13-98

(205) 967-0074

CR2E034 (10/97)