

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 13 AM 8:13

DOCUMENT # 854552

(7)

1. Corporation Name

W. H. SMITH NEWS AND GIFT SHOPS INC

Principal Place of Business

3200 WINDY HILL ROAD
STE 1500 WEST TOWER
MARIETTA GA 30067
US

Mailing Address

3200 WINDY HILL ROAD
STE 1500 WEST TOWER
MARIETTA GA 30067
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/01/1982

3a. Date of Last Report

05/01/1994

4. FEI Number

58-1123802

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. 119.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

Atlanta, GA

23

Zip Country

30339 US

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

Atlanta, GA

28

Zip Country

30339 US

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

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 reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	MCNAMARA, RICHARD J.
STREET ADDRESS	3200 WINDY HILL ROAD, SUITE 1500 W. TOWER
CITY - ST - ZIP	MARIETTA GA
TITLE	CFO
NAME	WIGGINS, JEFF L.
STREET ADDRESS	3200 WINDY HILL RD., STE 1500 WEST TOWER
CITY - ST - ZIP	MARIETTA GA
TITLE	D
NAME	HANCOCK, JOHN M.
STREET ADDRESS	3200 WINDY HILL RD., STE 1500 WEST TOWER
CITY - ST - ZIP	MARIETTA GA
TITLE	CEO
NAME	HANCOCK, JOHN M.
STREET ADDRESS	3200 WINDY HILL RD., STE 1500 WEST TOWER
CITY - ST - ZIP	MARIETTA GA
TITLE	T
NAME	LINK, RICHARD J.
STREET ADDRESS	3200 WINDY HILL RD. STE 1500 WEST TOWER
CITY - ST - ZIP	MARIETTA GA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	3200 WINDY HILL RD, SUITE 1500 W. Tower
1.4 CITY - ST - ZIP	Atlanta, GA 30339
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	(delete)
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	Atlanta, GA 30339
3.4 CITY - ST - ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	Atlanta, GA 30339
4.4 CITY - ST - ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	TE CFO
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	Atlanta, GA 30339
6.1 TITLE	☐ Change ☐ 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)(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 no address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

5-17-95

Title

Signature (Print Name)