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

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAR 22 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 856854 (5)

1. Corporation Name
HARBERT-YEARGIN INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 105 EDINBURG COURT<br>P.O.BOX 6508<br>GREENVILLE SC 29606 | 105 EDINBURG COURT<br>P.O.BOX 6508<br>GREENVILLE SC 29606 |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/22/1983
3a. Date of Last Report: 05/10/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 84-0880124 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22) (27)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State (23) (28)
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip (24) Country (25) Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

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 reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | D | 1.1 TITLE | ASST TRES ☐ Change ☑ Addition |
| NAME | PHILLIPS, WILLIAM R. | 1.2 NAME | ELIZABETH LANGHAM |
| STREET ADDRESS | 208 HONEY HORN DRIVE | 1.3 STREET ADDRESS | P.O. Box 843 |
| CITY-ST-ZIP | SIMPSONVILLE SC | 1.4 CITY-ST-ZIP | DEVON PA 19333 |
| TITLE | PD | 2.1 TITLE | VP ☐ Change ☑ Addition |
| NAME | DUNN, JEROME RICHARD | 2.2 NAME | James A. Hopkins |
| STREET ADDRESS | 208 E. SEVEN OAKS | 2.3 STREET ADDRESS | 103 Pebble Creek Way |
| CITY-ST-ZIP | GREENVILLE SC | 2.4 CITY-ST-ZIP | Taylors, S.C. 29687 |
| TITLE | VP | 3.1 TITLE | CHAIRMAN ☐ Change ☑ Addition |
| NAME | FRANCH, ALBERT ROY | 3.2 NAME | Robert MARSHALL |
| STREET ADDRESS | 2697 S. LEWISTON | 3.3 STREET ADDRESS | 64 Brookside DR. |
| CITY-ST-ZIP | AURORA CO | 3.4 CITY-ST-ZIP | Upper Saddle River, NJ. 07458 |
| TITLE | TCD | 4.1 TITLE | Director ☐ Change ☑ Addition |
| NAME | BIRD, WILLIAM CARL | 4.2 NAME | John M. Harbert III |
| STREET ADDRESS | 391 GAIL AVENUE | 4.3 STREET ADDRESS | 2700 Wood Ridge Rd |
| CITY-ST-ZIP | GREER, SC. | 4.4 CITY-ST-ZIP | Birmingham, AL 35223 |
| TITLE | S | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | HIGGINS, JAMES C., JR. | 5.2 NAME | |
| STREET ADDRESS | 501 CHESTNUT LANE | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | WAYNE PA | 5.4 CITY-ST-ZIP | |
| TITLE | AS | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | FISCHER, MARVIN R | 6.2 NAME | |
| STREET ADDRESS | 110 RICELAN | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | SIMPSONVILLE SC | 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)(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: William Carl Bird 3/14/95 803-242-6160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0478203 FP