

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

FILED

May 19 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F03882** (0)  
 1. Corporation Name  
**BANNER EQUITIES, INC.**



Principal Place of Business <b>FDIC-100 COLONY SQ. BOX 68</b> <b>STE 2200</b> <b>ATLANTA GA 30361</b> <b>US</b>	Mailing Address <b>FDIC-100 COLONY SQ. BOX 68</b> <b>STE 2200</b> <b>ATLANTA GA 30301-0068</b> <b>US</b>
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2. Principal Place of Business <b>FDIC-1201 W. Peachtree St.</b>	2a. Mailing Address <b>FDIC-1201 W. Peachtree St.</b>
21. Suite, Apt. #, etc. <b>Suite 1800</b>	26. Suite, Apt. #, etc. <b>Suite 1800</b>
22. City & State <b>Atlanta, GA</b>	27. City & State <b>Atlanta, GA</b>
23. Zip <b>30309</b>	28. Zip <b>30309</b>
25. Country <b>U.S.</b>	30. Country <b>U.S.</b>

3. Date Incorporated or Qualified <b>10/29/1980</b>	3a. Date of Last Report <b>05/01/1996</b>
4. FEI Number <b>59-2055153</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM**  
**1200 SOUTH 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

**FL**

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	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>LOCKWOOD, LAWRENCE W</b>	
STREET ADDRESS	<b>FDIC-100 COLONY SQ. BOX 68</b>	
CITY-ST-ZIP	<b>ATLANTA GA 30361</b>	
TITLE	<b>DVAS</b>	<input type="checkbox"/> DELETE
NAME	<b>FARRELL, CHARLES P</b>	
STREET ADDRESS	<b>FDIC-100 COLONY SQ. BOX 68</b>	
CITY-ST-ZIP	<b>ATLANTA GA 30361</b>	
TITLE	<b>DVAS</b>	<input type="checkbox"/> DELETE
NAME	<b>RAY, PATRICIA</b>	
STREET ADDRESS	<b>FDIC-100 COLONY SQ. BOX 68</b>	
CITY-ST-ZIP	<b>ATLANTA GA 30361</b>	
TITLE	<b>DST</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ROSSETTI, JOHN P</b>	
STREET ADDRESS	<b>FDIC-100 COLONY SQ. BOX 68</b>	
CITY-ST-ZIP	<b>ATLANTA GA 30361</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>FDIC-1201 W. Peachtree St., Suite 1800</b>
1.4 CITY-ST-ZIP	<b>Atlanta, GA 30309</b>
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>FDIC-1201 W. Peachtree St., Suite 1800</b>
2.4 CITY-ST-ZIP	<b>Atlanta, GA 30309</b>
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	<b>FDIC-1201 W. Peachtree St., Suite 1800</b>
3.4 CITY-ST-ZIP	<b>Atlanta, GA 30309</b>
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	<b>Gary L. Thompson</b>
4.3 STREET ADDRESS	<b>FDIC-1201 W. Peachtree St., Suite 1800</b>
4.4 CITY-ST-ZIP	<b>Atlanta, GA 30309</b>
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 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: Lawrence W. Lockwood  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Lawrence W. Lockwood, President**

4/24/97

(404) 817-2569

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