FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 12 1998 8:00am ELORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F32839 (5)THE EXECUTIVE SPEAKER, INC. Principal Place of Business Mailing Address 3535 PIEDMONT RD. NE 3535 PIEDMONT RD. NE ATLANTA GA 30305 ATTN: TAX DEPT. 10D ATLANTA GA 30305 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/22/1981 2. Principal Place of Business 2a, Mailing Address 4. FEI Number 59-2090653 Not Applicable 21 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6, Election Campaign Financing 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tay due June 30. Yes X No Zιρ Country Zip Country Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name CT CORPORATION SYSTEM 1200 & PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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. Hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed is tree of registered agent and tille if applicable (NOTE: Rogistered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 11111 **LINDA ARNOLD** NAME 1.2 NAME 3109 MAPLE DRIVE, SUITE 410 STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE Change PAM W. TAYLOR NAME 22 NAME 3535 PIEDMONT RD, NE STREET ADDRESS 23 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 2. 4 CITY - ST - ZIP CEO DELETE Change TITLE 3 1 TITLE C. DOUGLAS MILLER NAME 3.2 NAME 3535 PIEDMONT RD, NE STREET ADDRESS 3.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 3.4. City - St - ZiP DELETE TITLE 4.1 TITLE Change NAME Larry J. Bryan 4. 2 NAME 3535 PIEDMONT RD. NE STREET ADDRESS 4.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change 5.1 TITLE C. DOUGLAS MILLER

14. Thereby certify that the information supplied with this filling 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 eath; 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

3535 PIEDMONT RD., NE

3535 PIEDMONT RD., NE

ATLANTA GA

MARK H. HAIN

atlanta ga

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Chilery 1 STANCON

DELETE

albelos

Change

Applied For

Addition

Addition

Addition

Addition

Addition

Addition

CR2E034