

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F92000000848 (3)

1. Corporation Name

MAE VENTURES, INC.



Principal Place of Business

Mailing Address

P.O. BOX 1089  
GREENVILLE SC 29602

P.O. BOX 1089  
GREENVILLE SC 29602

2. Principal Place of Business

2a. Mailing Address

21 One Insignia Financial Plaza

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27 City & State

23

Greenville, SC

28

Zip

Country

Zip

Country

24

29601

25

USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 time of application

(Not for Registered Agent's signature and time of registration)

DATE

12. OFFICERS AND DIRECTORS

TITLE VT ☐ DELETE

NAME URETTA, RONALD  
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA  
CITY-STATE-ZIP GREENVILLE SC

TITLE V ☐ DELETE

NAME JARRARD, WILLIAM H. J  
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA  
CITY-STATE-ZIP GREENVILLE SC

TITLE AS ☐ DELETE

NAME BUECHLER, KELLEY M  
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA  
CITY-STATE-ZIP GREENVILLE SC

TITLE S ☐ DELETE

NAME LINES, JOHN K.  
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA  
CITY-STATE-ZIP GREENVILLE SC

TITLE DP ☐ DELETE

NAME VINSON, CARROLL D.  
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA  
CITY-STATE-ZIP GREENVILLE SC

TITLE CAOC ☐ DELETE

NAME LONG, ROBERT D. J  
STREET ADDRESS ONE INSIGNIA FINANCIAL PLAZA  
CITY-STATE-ZIP GREENVILLE SC

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert D. Long, Jr.

4/4/96

864-239-1000

CR2E034 (12/95)