

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

FILED
Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000000168 (5)

1. Corporation Name

AMERICAN STAR PROPERTIES, INC.



Principal Place of Business 1532 DUNWOODY VILLAGE PKWY SUITE 150 ATLANTA GA 30338 US	Mailing Address 1532 DUNWOODY VILLAGE PKWY SUITE 150 ATLANTA GA 30338-4136 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 01/14/1993	3a. Date of Last Report 03/25/1996
4. FEI Number 58-2010396	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	
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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 this if applicable

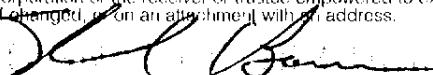
(NOTE: Registered Agent signature required when relocating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOWEN, HOWARD E	1.2 NAME	
STREET ADDRESS	1532 DUNWOODY VILLAGE PKWY., SUITE 150	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30338	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARVIN, WILLIAM S	2.2 NAME	
STREET ADDRESS	1532 DUNWOODY VILLAGE PKWY., SUITE 150	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30339	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRISON, JAMES H	3.2 NAME	
STREET ADDRESS	5731 LYONS VIEW DRIVE, SUITE 208	3.3 STREET ADDRESS	
CITY-ST-ZIP	KNOXVILLE TN 37919	3.4 CITY-ST-ZIP	
TITLE	AS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, SHEILA	4.2 NAME	
STREET ADDRESS	1532 DUNWOODY VILLAGE PKWY., SUITE 150	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30338	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRIE, THOMAS D	5.2 NAME	
STREET ADDRESS	115 PERIMETER CENTER PLACE, SUITE 170	5.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30346	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:



PRAS 4/11/97 (770) 671-8270

CR2E034 (9/96)