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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Q12 438 1388

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300001346 (6)

CCI OF GEORGIA, INC.

00, 0,										
Principal Place	e of Business	Mailing Address					III da iiile l aide iiiii a d iii d			
P.O. BOX 1745 ALBANY GA 317		P.O. BOX 1745	•							
						1	Incorporated or Qua		Date of Last F /29/1996	Report
2. Principal Pi	lace of Business	2a. Mailing Address	28. Mailing Address				Number		-	pplied For
21		26				58	-1995742		come a gradica in dia in	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	₁			5. Cert	ificate of Status Desir	ed 🔲		Additional
City & State		City & State	·							Required
23		· · · · · · · · · · · · · · · ·				I	tion Campaign Finance t Eurol Contribution	ing [7]		May Be
Zip Country			Z8 Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30	,		I	Florida Statutes Yes No			
	9. Name and Address of Cur		12.7.1	· I ···-			ne and Address of N	ew Registered	Agent	
CT	CORPORATION SYSTEM			81	Name					
	SOUTH PINE ISLAND ROAD		82 Street Ad			ddress (P.O. P	lox Number is Not Ac	centable)		
PLAN	VTATION FL 33324				Circo / Novices (1.55. Fee Hermiter to Hermiter)					
				83						
				84	City		FL 85 Zip Code			Code
11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the St	0502 and 607.1508, Florida Si	ialutes, the	l.,. I above- ed by:	named c	orporation sub	muts this statement for			its registered
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505	, Florida St	atutes	ino corpo	Tabon 5 Dour 6	or or estors. Thereby			, regionerece
SIGNATURE	Signature, types or printed name of registered	ances and the depole of	/N/ME Rousio	and Anon	l Cional en e	quired when reinstr		Ed (378)	м ;	
12.	<u> </u>	AND DIRECTORS	13		it organization to the		TIONS/CHANGES TO		ID DIRECTO	RS IN 12
TITLE	PTCD	DELETE	1.1	1/1LE					Change	Addition
NAME	HARDY, JULIE M		12	NAME			_	~ ·		
STREET ADDRESS	109 FLYNT AVENUE		1.3	STREET /	NDORESS	402	Cordale			
CITY-ST-ZIP	ALBANY GA		1.4	CHY-SI	- ZIP			31705		
TITLE	8	DELETE	2.1	TITLE					Change	Addition
NAME	HARDY, DAVID A		2.21	NAME			Cerdala	RJ		
STREET ADDRESS	109 FLINT AVENUE		2.3	STREELA	DORESS	402	Cerdala	•		
CITY-ST-ZIP	ALBANY GA			CITY-S1	- 21F			3170		
TITLE		☐ DELETE		TILLE				· ·	Change	Addition
NAME				NAME						
STREET ADDRESS				STREET A						
CITY-ST-ZIP		DECETE		CHY-SI	- ZIP				Change	Addition
TITLE NAME	. •	ר⊃ מנינונ		TITLE NAME					ш опапуе	L.J AUGIOUII
STREET ADDRESS				'NAIVIE STREET A	IDDBECC					
CITY-ST-ZIP			ı	CITY-ST						
TITLE		DELLIE		Tille	- 2 0				Change	Addition
NAME				NAME						
STREET ADDRESS			T.	STREET A	ADDRESS					
CITY-ST-ZIP				CITY-ST						
TITLE		DETETE		1111.6					Change	Addition
NAME			6.2	NAME						
STREET ADDRESS			6.3	STREET A	NODRESS					
CITY-ST-ZIP				CITY-S1						
14. I do hereh	by certify that the information support indicated on this annual report of	olied with this filling does not our supplemental appulationer	calify for the	e exen	nption sta	ted in Section	119,07(3)(i), Florida S	Statutes. I furth	er certify that	t the
I am an of	fficer or director of the corporation n Block 12 or Block 13 if changed	i or the receiver or trustee em	powered to							