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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # **F93000002047 (9)**  
1. Corporation Name  
**FLAIR PPC CORP.**



DO NOT WRITE IN THIS SPACE

|   |   |
|---|---|
| Principal Place of Business<br><b>4847 SW 40TH AVENUE<br/>SUITE 800<br/>OCALA FL 34474<br/>US</b> | Mailing Address<br><b>31 S COLLEGE ST<br/>SUITE 2300<br/>CHARLOTTE NC 28202-6039<br/>US</b> |
|---|---|

|  |  |
|--|--|
| 3. Date Incorporated or Qualified<br><b>04/30/1993</b>   |  |
| 4. FEI Number<br><b>59-3145708</b>   | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

|   |   |
|---|---|
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country | 2a. Mailing Address<br>26 301 S. College St.<br>27 Suite, Apt. #, etc.<br>28 City & State<br>29 Zip<br>30 Country |
|---|---|

9. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent  
81 Name **CT CORPORATION SYSTEM**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1200 S. Pine Island Road**  
83  
84 City **Plantation** FL 85 **33324**

*RA change  
12/17/97*

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 \_\_\_\_\_ (see attached)  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS                     |   | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>CD<br/>BEARSE, RICHARD A<br/>2300 ONE FIRST UNION CENTER<br/>CHARLOTTE NC</b> <input checked="" type="checkbox"/> DELETE | 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>V<br/>BELL, FORREST W<br/>4847 S.W. 40TH AVE.<br/>OCALA FL</b> <input checked="" type="checkbox"/> DELETE                | 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY-ST-ZIP                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DV<br/>BURNS, B.B. JR<br/>2300 ONE FIRST UNION CENTER<br/>CHARLOTTE NC</b> <input checked="" type="checkbox"/> DELETE    | 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY-ST-ZIP                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PD<br/>HAYES, LACY L<br/>4847 S.W. 40TH AVE.<br/>OCALA FL</b> <input type="checkbox"/> DELETE                            | 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>4.2 NAME<br>4.3 STREET ADDRESS<br>4.4 CITY-ST-ZIP                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DT<br/>DRURY, R.E.<br/>2300 ONE FIRST UNION CENTER<br/>CHARLOTTE NC</b> <input type="checkbox"/> DELETE                  | 5.1 TITLE <b>D/V</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>5.2 NAME<br>5.3 STREET ADDRESS<br>5.4 CITY-ST-ZIP |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>VER HAGEN, J.K.<br/>2300 ONE FIRST UNION CENTER<br/>CHARLOTTE NC</b> <input checked="" type="checkbox"/> DELETE    | 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>6.2 NAME<br>6.3 STREET ADDRESS<br>6.4 CITY-ST-ZIP                       |

14. I 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.

Robert D. McKinnon *[Signature]* 12/17/97 704-247-6044

CR2E034 (10/97)

FLAIR PPC CORPORATION

**Title**  
**Name**  
**Address**  
**City, State, Zip**

**Title**  
**Name**  
**Address**  
**City, State, Zip**

D  
Zimmer, D.R.  
2300 One First Union Center  
Charlotte, NC 28202-6039

EVP/COO  
Tisdale, J.A.  
4647 SW 40<sup>th</sup> Avenue  
Ocala, FL 34474

V/AS  
Gelinas, M. E.  
4647 SW 40th Avenue  
Ocala, FL 34474

V  
Eisenberg, G. A.  
2300 One First Union Center  
Charlotte, NC 28202-6039

V/AS/AT  
Ellenburg, R. O.  
4647 SW 40th Avenue  
Ocala, FL 34474

V  
Magee, R. L.  
2300 One First Union Center  
Charlotte, NC 28202-6039

S  
McKinney, R. P.  
2300 One First Union Center  
Charlotte, NC 28202-6039

AS  
Burtis, J. M.  
2300 One First Union Center  
Charlotte, NC 28202-6039

AS  
Mayo, J.Z.  
2300 One First Union Center  
Charlotte, NC 28202-6039

AS  
Dickerson, N.K. III  
2300 One First Union Center  
Charlotte, NC 28202-6039

T  
Snyder, T. J.  
2300 One First Union Center  
Charlotte, NC 28202-6039

AT  
Hassett, J. P.  
2300 One First Union Center  
Charlotte, NC 28202-6039

AT  
Greenfeld, S. D.  
2300 One First Union Center  
Charlotte, NC 28202-6039