

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 # F93000004459 (4)

1. Corporation Name

CHARTER PROPERTY MANAGEMENT CO. OF ALABAMA, INC.



Principal Place of Business		Mailing Address	
2006 EXECUTIVE PARK DRIVE OPELIKA AL 36801 1702 CATHERINE COURT SUITE A AUBURN, AL 36830		2006 EXECUTIVE PARK DRIVE OPELIKA AL 36801 PO BOX 3937 AUBURN, AL 36831-8937	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 1702 CATHERINE COURT	26 P.O. Box 3937	09/27/1993	04/27/1995
22 SUITE A	27	4. FEI Number	Applied For
23 AUBURN, AL	28 AUBURN AL	63-1041101	Not Applicable
24 36830	29 36831	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 USA	30 USA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GIOIELLO, JOHN L P.A. 1002 W. 23RD STREET, SUITE 350 PANAMA CITY FL 32405		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		DATE	
Signature of Officer or Director		Date	
12. OFFICERS AND DIRECTORS			
TITLE	DCVP	☐ DELETE	
NAME	BENNETT, FRED		
STREET ADDRESS	2006 EXECUTIVE PARK DRIVE		
CITY-ST-ZIP	OPELIKA AL		
TITLE	DP	☐ DELETE	
NAME	CURENTON, DON		
STREET ADDRESS	2006 EXECUTIVE PARK DRIVE		
CITY-ST-ZIP	OPELIKA AL		
TITLE	S	☐ DELETE	
NAME	BENNETT, FRED		
STREET ADDRESS	2006 EXECUTIVE PARK DRIVE		
CITY-ST-ZIP	OPELIKA AL		
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1. TITLE		☐ Change ☐ Addition	
2. NAME			
3. STREET ADDRESS			
4. CITY-ST-ZIP			
5. TITLE		☐ Change ☐ Addition	
6. NAME			
7. STREET ADDRESS			
8. CITY-ST-ZIP			
9. TITLE		☐ Change ☐ Addition	
10. NAME			
11. STREET ADDRESS			
12. CITY-ST-ZIP			
13. TITLE		☐ Change ☐ Addition	
14. NAME			
15. STREET ADDRESS			
16. CITY-ST-ZIP			
17. TITLE		☐ Change ☐ Addition	
18. NAME			
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24. CITY-ST-ZIP			
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81. TITLE		☐ Change ☐ Addition	
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83. STREET ADDRESS			
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85. TITLE		☐ Change ☐ Addition	
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87. STREET ADDRESS			
88. CITY-ST-ZIP			
89. TITLE		☐ Change ☐ Addition	
90. NAME			
91. STREET ADDRESS			
92. CITY-ST-ZIP			
93. TITLE		☐ Change ☐ Addition	
94. NAME			
95. STREET ADDRESS			
96. CITY-ST-ZIP			
97. TITLE		☐ Change ☐ Addition	
98. NAME			
99. STREET ADDRESS			
100. CITY-ST-ZIP			

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, upon an attachment with an address.

SIGNATURE: Don Curenton DON CURENTON, PRESIDENT
DATE: 4/15/96 (34) 502-4200
OFFICE PHONE:

CR2E034 (12/95)