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Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # **F93000004806 (6)**

1. Corporation Name
EXCELL SALES, INC.

Principal Place of Business	Mailing Address
2700 DUE WEST DR KENNESAW GA 30144-3588	2700 DUE WEST DR KENNESAW GA 30144-3532

3. Date Incorporated or Qualified: **10/25/1993**
3a. Date of Last Report: **05/01/1996**

4. FEI Number: **58-1386062** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BROWN, ROBERT M
709 E. MELBOURNE AVE
CREEKSIDE APARTMENTS
MELBOURNE FL 32901

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: (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	KIRK, HARRY V	1.2 NAME	
STREET ADDRESS	6737 YACHT CLUB DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	ACWORTH GA	1.4 CITY-ST-ZIP	
TITLE	PD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	COLLINS, MELVIN R	2.2 NAME	
STREET ADDRESS	2700 DUE WEST DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	KENNESAW GA	2.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	KIRK, THOMAS V	3.2 NAME	
STREET ADDRESS	2700 DUE WEST DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	KENNESAW GA	3.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	BLAESING, ANDREA K	4.2 NAME	
STREET ADDRESS	2700 DUE WEST DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	KENNESAW GA	4.4 CITY-ST-ZIP	
TITLE	STD ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MARSHALL, RICK A	5.2 NAME	
STREET ADDRESS	2700 DUE WEST DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	KENNESAW GA	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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.

SIGNATURE: Rick A. Marshall Rick A. Marshall 3-13-97 770-427-4203
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0013171