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PROFIT CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000000903

1. Corporation Name  
CONTINENTAL FIELD SYSTEMS, INC.

Principal Place of Business  
23 WESTGATE BLVD.  
SAVANNAH GA 34105

Mailing Address  
23 WESTGATE BLVD.  
SAVANNAH GA 34105

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
02/23/1994

4. FEI Number  
58-1364995

Applied For  
Not Applicable

2. Principal Place of Business  
21 23 Westgate Blvd.

2a. Mailing Address  
26 23 Westgate Blvd.

5. Certificate of Status Desired  \$8.75 Additional Fee Required

22 Suite, Apt. #, etc.  
23 Savannah, GA

27 Suite, Apt. #, etc.  
28 Savannah, GA

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

24 31405 25 USA

29 31405 30 USA

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

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 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 P  DELETE  
NAME ERICH, CHRISTOPH  
STREET ADDRESS 23 WESTGATE BLVD  
CITY-ST-ZIP SAVANNAH GA 31405

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE S  DELETE  
NAME SMILEY, BARBARA  
STREET ADDRESS 23 WESTGATE BLVD.  
CITY-ST-ZIP SAVANNAH GA 34105

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  DELETE  
NAME Accounting Manager  
STREET ADDRESS Meredith Page  
CITY-ST-ZIP 23 Westgate Blvd.  
Savannah, GA 31405

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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, with all other like empowered.

SIGNATURE: Meredith Page 2/5/99 (912) 232-8121  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)