

FILED
Apr 11, 2005 8:00 am
Secretary of State

DOCUMENT # F94000002111



Mailing Address
2000 INTERNATIONAL PARK DR.
BIRMINGHAM, AL 35243

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Zip

Country

03292005 Chg-P CR2E034 (10/03)

4. FEI Number
63-1010444

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name _____

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11


TITLE	CEO,	<input type="checkbox"/> Delete
NAME	FERGUSON, BOB	
STREET ADDRESS	2000 INTERNATIONAL PARK DR	
CITY - ST - ZIP	BIRMINGHAM, AL 35243	

TITLE	VPAT	<input checked="" type="checkbox"/> Delete
NAME	NOVICK, RAY	
STREET ADDRESS	2000 INTERNATIONAL PARK	
CITY - ST - ZIP	BIRMINGHAM, AL 35243	

TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, CLYDE M	
STREET ADDRESS	2000 INTERNATIONAL PARK DR.	
CITY-ST-ZIP	BIRMINGHAM, AL	

TITLE	VPS	<input type="checkbox"/> Delete
NAME	CASSADY, GEORGE E III	
STREET ADDRESS	2000 INTERNATIONAL PARK DRIVE	
CITY-ST-ZIP	BIRMINGHAM, AL 35243	

TITLE	T	<input type="checkbox"/> Delete
NAME	JOEHL, DOUGLAS	
STREET ADDRESS	2000 INTERNATIONAL PARK DR	
CITY-ST-ZIP	BIRMINGHAM, AL 35243	

TITLE	C	 Delete
NAME	ISAACS, ARNOLD D	
STREET ADDRESS	20010 COLONY POINT LANE	
CITY-ST-ZIP	DAVIDSON, NC 28036	

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
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NAME _____
STREET ADDRESS _____
CITY - ST - ZIP _____

TITLE	DIRECTOR	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	GOODRICH, T.M.		
STREET ADDRESS	2000 INTERNATIONAL PARK DR.		
CITY-ST-ZIP	BIRMINGHAM AL 35243		

TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE DIRECTOR ☐ Change ☒ Addition
NAME REDMON, John W.
STREET ADDRESS 2000 INTERNATIONAL PARK DR.
CITY-ST-ZIP BIRMINGHAM AL 35243

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X  Doug M. Joehl / TREASURER 04/05/05 (205) 972-6497

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone # _____