FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # F9400002565 (9)

LAMAR ADVERTISING OF MOBILE, INC.

Principal Place of Business

3353 HALLS MILLS RD

Mailing Address

P.O. BOX 66338

FILED Feb 02 1998 8:00am Secretary of State



3. Date Incorporation of Qualified 2a	MOBILE AL 3	MOBILE AL 36606 BATON ROUGE LA 70896				DO NOT WRITE IN THIS SPACE		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Risk	US							
22. Monitorial Place of Business 23. Maing Address 4. FEI Number Acceptable Acceptable Saits Act 8, etc. 20 Suits S							· ·	
Sulfe, Apt #, etc. 25	2 Principal Place of Business 29 Mailing Address							
Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. S. Centificate of Status Desired S. Centificate of Status Desired See Required Pee Required Pee Regulated Agent CT COPPORATION SYSTEM 1200 S. PINE SLAND RD. PLANTATION FL 33524 Bit Name							11.00000101	
City & State City & C			# etc			69.7E A J.		
City & State Country Zip Country Sign Country Sign Country Sign Country Sign Country Sign		,, G.G.	— · · · ·	oute, Apr. #, etc.				
20 20 20 20 20 20 20 20		o						
2p								
Solution		Country		Cour	atrac			
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Fursuant 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 egistered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or egistered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or egistered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or egistered agent, and the statement for the purpose of changing its registered office or egistered agent, and the statement for the purpose of changing its registered agent. In the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or egistered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of the purpose of changing its registered agent. In the state of florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In the statement for the purpose of changing its registered agent. In the statement for the purpose of changing its registered agent for the purpose of purpose of purpose agent for the purpose of purpose of purpose agent for the purpose of purpose of purpose agent for the purpose of purpose agent for the pur		— ·	<u> </u>		м. у			
C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sactions 807 0502 and 607 1508. Florida Statutes, the above-remed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Stoch change was authorized by the corporation submits this statement for the purpose of changing its registered agent. It am femiliar with, and accept the obligations of, Section 67 0505. Florida Statutes. SIGNATURE 12.	24			3U				
120 S. PINE ISLAND RD. PLANTATION FL 33324 82 Sireet Address (P.O. Box Number is Not Acceptable) 13. 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 agent. I am familiar with, and accept the obligations of, Section 607 0506, Florida Statutes. 14. 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 agent. I am familiar with, and accept the obligations of, Section 607 0506, Florida Statutes. SIGNATURE Signature, speak or private agent and title il sportable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1111E PD ORDERS STREET ADDRESS STREET ADDRESS OTTY-ST-2P STREET ADDRESS STREET ADDRESS ACTIV-ST-2P BATON ROUGE LA 1. STREET ADDRESS ACTIV-ST-2P BATON ROUGE LA 70806 10. ELETE 2. STREET ADDRESS ACTIV-ST-2P BATON ROUGE LA 70806 10. ELETE 3. TITLE 1. TITLE 1. STREET ADDRESS STREE								
PLANTATION FL 33324 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 femiliar with, and accept the obligations of, Section 607.0505, Priorida Statutes. SIGNATURE Signature from the purpose of changing its registered agent and mine it agriculture agent. I am femiliar with, and accept the obligations of, Section 607.0505, Priorida Statutes. SIGNATURE Signature from the purpose of changing its registered agent and mine it applicable. Priorida Statutes. SIGNATURE Signature from the purpose of changing its registered agent and mine it applicable. Priorida Statutes. SIGNATURE Signature from the purpose of changing its registered agent. I am femiliar with a september of regi					_			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-harmond corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, in the purpose of changing its registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE PD OFFIC		• - •		۱۰	82	Street Address (P.O. Box Number is Not Acceptable)		
B4 City FL 85 Zip Code	PU	INTATION FL 33324		<u> </u>	B3			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submitle 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, and accept the obligations of, Section 607.0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent agent agent as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agen					55			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE PD 1.2 NAME STREET ADDRESS SISTING KEITH A 2.2 NAME STREET ADDRESS 1.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE VID DELETE 1.1 TITLE VID DELETE 2.1 TITLE VID DELETE 3.1 TITLE VID DELETE 3.3 STREET ADDRESS STR				Ī	84	City	85 Zip Code	
office or regustered 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, and there is a hereby accept the appointment as registered agent, and there is a hereby accept the appointment as registered agent, and thereby accept the appointment as registered agent, and the appointment as registered agent, and thereby accept the appointment as registered agent, and the appointment as a part of the appointment asp	11. Pursuant	to the provisions of Sections 607.050:	2 and 607 1508 Florida Statutes	the ab	OVE	-named co		
Signature, topeas or printed awaper and time I applicable (NOTE Registance Agent algorithms upon Infrintaling) DATE	office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Flori	thorized ida Statu	by ites.	the corpor	pration's board of directors. I hereby accept the appointment as registered	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Signature triped or printed name of registered some	or and title if applicable (NOTE	Paristered	Ann	ot signature rec	onuited when relectation)	
TITLE PD DELETE 1.1 TITLE PD DELETE 1.1 TITLE Addition RELLY, KEVIN P JR STREET ADDRESS 55.51 CORPORATE BLVD 1.3 STREET ADDRESS 55.51 CORPORATE BLVD 1.4 CITY-ST-ZIP BATON ROUGE LA 1.6 CITY-ST-ZIP BATON ROUGE LA 1.6 CITY-ST-ZIP BATON ROUGE LA 70806 2.2 AGRICAN STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70806 2.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70806 2.4 CITY-ST-ZIP BATON ROUGE LA 70806 2.5 AG CITY-ST-ZIP BATON ROUGE LA 70808 2.5 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 2.5 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.5 CITY-ST-ZIP BATON ROUGE LA 70808 4.5 STREET ADDRESS SAG CITY-ST-ZIP BATON ROUGE LA 70808 5.5 STREET ADDRESS SAG CITY-ST-ZIP BATON ROUGE LA 70808 5.5 STREET ADDRESS SAG CITY-ST-ZIP Change Addition SAG CITY-ST-ZIP CHANGE SAG CITY-ST-ZIP CH					· igita	it signature rec	 	
NAME STREET ADDRESS 5551 CORPORATE BLVD BATON ROUGE LA 1.3 STREET ADDRESS BATON ROUGE LA 1.4 CTTY-ST-ZPP DELETE 2.1 TITLE NAME ISTRE, KEITH A STREET ADDRESS 1611 HIDEAWAY CT. BATON ROUGE LA 70806 1715				_	E			
STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 1.3 STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70806 1.3 STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME LAMAR, CHARLES W III ASSTREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.3 STREET ADDRESS CITY-ST-ZIP NAME LAMAR, CHARLES W III ASSTREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.4 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.5 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.5 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.6 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.6 STREET ADDRESS CITY-ST-ZIP CHARLES W III ASSTREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 1.6 STREET ADDRESS CITY-ST-ZIP CHARLES W III ASSTREET ADDRESS CITY-ST-ZIP CHARLES W III C		REILLY, KEVIN P.JR	_				_ • _	
CITY-ST-ZIP BATON ROUGE LA 1.4 CITY-ST-ZIP BATON ROUGE LA 1.4 CITY-ST-ZIP BATON ROUGE LA 1.5 CHANGE 1.5 CHANGE 1.6 CHANGE 1.6 CHANGE 1.7 CHANGE 1.7 CHANGE 1.8 CHY-ST-ZIP 1.1 LE 1.1 LE 1.2 NAME 1.2 NAME 1.3 TITLE 1.3 TITLE 1.4 LAMAR, CHARLES W III 1.4 STREET ADDRESS 1.5 COR PORATE BLVD 1.5 STREET ADDRESS 1.6 CHANGE 1.6 CHANGE 1.7 ST-ZIP 1.7 CHANGE 1.8 STREET ADDRESS 1.8 STREET ADDRESS 1.9 CHARLES W III 1.8 STREET ADDRESS 1.9 CHARLES W III 1.8 STREET ADDRESS 1.7 CAR PORATE BLVD 1.8 STREET ADDRESS 1.9 CHARLES W III 1.8 STREET ADDRESS 1.9 CHARLES W III 1.9 CHANGE 1.0 CHANGE 1.0 CHARGE 1		•				ADDESC		
TITLE VTD DELETE 2.1 TITLE Change Addition NAME ISTRE, KEITH A 12 NAME STREET ADDRESS 1611 HIDEAWAY CT. 2.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70806 DELETE 3.1 TITLE NAME MARCHAND, GERALD H 3.2 NAME STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA STREET ADDRESS DELETE SD DELETE ST D Change Addition NAME LAMAR, CHARLES W III 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.4 CITY-ST-ZIP STREET ADDRESS HIGHLAND RD. ASSTREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.4 CITY-ST-ZIP STREET ADDRESS SA STREET ADDRESS SA STREET ADDRESS STREET ADDRESS SA STREET ADDRESS SA STREET ADDRESS STREET ADDRESS S								
NAME STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70806 LA CITY-ST-ZIP TITLE VD MARCHAND, GERALD H STREET ADDRESS CITY-ST-ZIP TITLE SD LDELETE AL CITY-ST-ZIP AL CITY-ST-ZIP TITLE SD STREET ADDRESS CITY-ST-ZIP TITLE SD STREET ADDRESS CITY-ST-ZIP TITLE SD STREET ADDRESS CITY-ST-ZIP TITLE SS STREET ADDRESS STRE			DELETE			- ZIP	Change Addition	
STREET ADDRESS CITY-ST-ZIP TITLE VD DELETE 3.1 TITLE ARACHAND, GERALD H STREET ADDRESS CITY-ST-ZIP SS D DELETE 4.1 TITLE SD LAMAR, CHARLES W III 4.2 NAME LAMAR, CHARLES W III 4.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.4 CITY-ST-ZIP TITLE SD DELETE 5.1 TITLE SS HIGHLAND RD. STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.4 CITY-ST-ZIP TITLE SS HIGHLAND RD. STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE SS HIGHLAND RD. STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP TITLE SS HIGHLAND RD. STREET ADDRESS CITY-ST-ZIP TITLE SS HIGHLAND RD. STREET ADDRESS CITY-ST-ZIP TITLE SS HIGHLAND RD. STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SS STREET ADDRESS STR	ſ					-		
BATON ROUGE LA 70806 2.4 CITY-ST-ZIP ITILE VD MARCHAND, GERALD H 3.2 NAME STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 3.3 STREET ADDRESS BATON ROUGE LA 3.4 LITTLE SD LAMAR, CHARLES W III 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.3 STREET ADDRESS CITY-ST-ZIP DELETE 5.1 ITILE 5.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME 5.4 CITY-ST-ZIP TITLE NAME 6.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME 6.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME 6.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME 6.4 CITY-ST-ZIP 1.4 Little 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		•			-	LDDDTGG		
TITLE VD DELETE 3.1 TITLE 3.2 NAME MARCHAND, GERALD H 3.2 NAME STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 3.4 CITY-ST-ZIP TITLE SD DELETE 4.1 TITLE								
MARCHAND, GERALD H STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 32 NAME 33 STREET ADDRESS CITY-ST-ZIP SD LAMAR, CHARLES W III 42 NAME LAMAR, CHARLES W III 43 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 44 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE 51 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 61 TITLE STREET ADDRESS CITY-ST-ZIP TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE CHANGE Addition Addition Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE CHANGE Addition Addition NAME Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE CHANGE Addition Addition NAME Addition NAME Addition NAME Addition NAME ADDRESS CITY-ST-ZIP TITLE CHANGE Addition Addition NAME Addition NAME ADDRESS CITY-ST-ZIP TITLE CHANGE ADDRESS CITY-ST-ZIP TITLE CHANGE ADDRESS ADDRESS ADDRESS ADDRESS CITY-ST-ZIP TITLE CHANGE ADDRESS A			DESETE			T-ZIP	Change	
STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA TITLE SD DELETE A1 TITLE SD AMAR, CHARLES W III A1. STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 TITLE STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 DELETE A1. STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STR	ŀ	- 177	C. Deterie				Ghange Addition	
CITY-ST-ZIP BATON ROUGE LA 3.4. CITY-ST-ZIP TITLE SD LAMAR, CHARLES W III STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.2 NAME LAMAR, CHARLES W III 4.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.4. CITY-ST-ZIP STREET ADDRESS S.1. TITLE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP DELETE 6.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Addition Addition Addition Addition NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information		•		1				
TITLE SD DELETE 4.1 TITLE JO Change Addition NAME LAMAR, CHARLES W III STREET ADDRESS 4.2 NAME LAMAR, C MRR LES JO LAMAR L	- 1			1		1		
NAME STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 4.4 CITY-ST-ZIP 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.5 I COR PORATE BLUE BATON ROUGE LA 70808 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE 6.3 STREET ADDRESS CITY-ST-ZIP 1.4. 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								
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME STREET ADDRESS 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	1		☐ DEFF#F	•		1.	Change Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME STREET ADDRESS 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	NAME	· · · · · · · · · · · · · · · · · · ·				4	LAMAR, CHARLES M. /11	
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME STREET ADDRESS 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	STREET ADDRESS			4.3 STR	EET A	ADDRESS J.	5551 CARPORATE BLVD	
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME STREET ADDRESS 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		BATON ROUGE LA 70808		4		-ZIP	BATON ROUGE LA YOUDS	
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS 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	TITLE		<u></u> DELETE	5,1 TITL	E		Change L Addition	
CITY-ST-ZIP TITLE DELETE 6.1 TITLE C.2 NAME STREET ADDRESS 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	NAME			5.2 NAN	Æ	-		
TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 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	STREET ADDRESS			5.3 STR	EET A	ADDRESS		
NAME STREET ADDRESS 6.3 STREET ADDRESS 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	CITY - ST - ZIP			5.4 CITY	/- ST-	-ZIP		
STREET ADDRESS 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	TITLE	-	DELETE	6.1 TITL	E	Ţ	Change Addition	
city-st-zip 6.4 city-st-zip 6.4 city-st-zip 14. Thereby 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	NAME			6.2 NAN	ΛE	l		
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	STREET ADDRESS			6.3 STR	EET A	ADDRESS		
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	CITY-ST-ZIP			6.4 CITY	/-ST	- ZIP		
	14. I hereby c	ertily that the information supplied wi	th this filing does not qualify for	the exer	npti	on stated	in Section 119.07(3)(i), Florida Statutes, I further certify that the information	

indicated on this amitted report or suppremental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a officer or director of the corporation or, the receiver outrustee 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, open an attachment with an address.