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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400003075 (8)

THE SIMPSON ORGANIZATION, INC.

Principal Place of Business SUITE 1850 600 WEST PEACHTREE STREET ATLANTA GA 30308		SUITE 1850 600 WEST PEACE	Mailing Address SUITE 1850 600 WEST PEACHTREE STREET ATLANTA GA 30308-3603							
	•••						3. Date Incorporated or Qualified 06/13/1994	1	te of Last R)1/1996	
2. Principal Place of Business 2a. Malling Ad			Idress				4. FEI Number 58-1816702	Applied For Not Applicable		
Suite, Apt.	# etc	26 Suite, Apt, #	Suite, Apt. #, etc.					\$8.75 Additional		
22		27	27				5. Certificate of Status Desired		Fee R	equired
			y & State				6. Election Campaign Financing			May Be
23 Zip	Country			Country			Trust Fund Contribution 8. This corporation has liability for i	ntangible		10 Fees
24	25	29	30	000				Yes [s. 189.032,
	9. Name and Address of Curr				_		10. Name and Address of New Re	gistered /	\gent	
	PRENTICE-HALL CORPORATK	ON SYSTEM, INC.		81	ا	Name				
1201 HAYS STREET				82	- 5	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
				83	ŀ					
IALL	AHASSEE FL 32301				L					
				84		City		FL		Code
agent. I a SIGNATURE	m familiar with, and accept the obl	igations of, Section 607	.0505, Florida	Statute	s. 		oration submits this statement for the p on's board of directors. I hereby accep		changing i ointment as	its registered s registered
	Signature, typed or printed name of registered a				ent:	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE PEDS AND	DIRECTO	PS IN 12
12.	PC OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	E NO AND	Change	Addition
NAME	SIMPSON, A B			1.2 NAME					_ ,	
STREET ADDRESS	600 W. PEACHTREE STREET	NW, SUITE 1850		1.3 STREET	AC	DORESS				
CITY-ST-ZIP	ATLANTA GA 30308	•		1.4 CITY - 5	31-2	ZIP				
TITLE	TSD	□ D	ELETÉ	2.1 TITLE					Change	Addition
NAME	HARDY, CHRISTOPHER D			2.2 NAME						
STREET ADDRESS	600 W. PEACHTREE STREET	NW, SUITE 1850		2.3 STREET						
CITY-61-ZIP	ATLANTA GA 30308			2. 4 City - 3.1 Title	\$1-	- ZIP			Change	Addition
TITLE NAME		ں لیے		3.2 NAME					Change	
STREET ADDRESS			1	3.3 STREET	1A1	DDRESS				
CITY-ST-ZIP			1	3 4. CHY-						
TITLE				4.1 1ITLE					Change	Addition
NAME			i	4 2 NAME						
STREET ADDRESS				4.3 STREET	I AC	DDRESS				
CITY-ST-ZIP				4.4 CHY-5	ST-	ZIP			Oharii	1.0000
TITLE			DELETÉ	5.1 TITLE					L Change	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET 5.4 CITY - 9						
CITY-ST-ZIP				DIFFULL TO	٠١٠	¢11.				

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

14. I do 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.

TIFLE

NAME

STREET ADDRESS

Jun 26 1997 8:00am Secretary of State

FILED

Change

Addition