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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003083 (2)

ADVANTOR HOLDING COMPANY

Principal Place of Business Mailing Address 424 N. WASHINGTON ST. 424 N. WASHINGTON ST. ALEXANDRIA VA 22314-2312 ALEXANDRIA VA 22314 3. Date Incorporated or Qualified 3a. Date of Last Report 06/14/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 <u>54-1431043</u> Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees 710 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes 🗌 No 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TERRY L MCCOLLOUGH ESQ **538 EAST WASHINGTON STREET** Street Address (P.O. Box Number is Not Acceptable) 82 ORLANDO FL 32801 83 84 City 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 Stgrature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. (96/6) (6) Addition DELETE 1.1 TITLE ☐ Change TITLE PD FLEMMING, HARRY S NAME 1.2 NAME 424 N. WASHINGTON DR. 1.3 STREET ADDRESS STREET ADDRESS ALEXANDRIA VA 22314 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE LANDIS, JANE A 22 NAME NAME 424 N. WASHINGTON DR. 23 STREET ADDRESS STREET ADDRESS ALEXANDRIA VA 22314 2 4 CITY - ST-ZIP CITY - S1 - ZIP DELETE Change Addition TITLE 31 TITLE NAME CLIFTON, RICHARD N 32 NAME 6101 LAKE ELLENOR DR. **33 STREET ADDRESS** STREET ADDRESS ORLANDO FL 32809 CITY - ST - ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - 2iP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - S1 - ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

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

appears in Block 12 or Block 13 if changed, or on an attachment with an address.