

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 08, 1999 8:00 am
Secretary of State

03-08-1999 90089 046 ***150.00

DOCUMENT # F95000001850

1. Corporation Name
EQUIPRIME, INC.

Principal Place of Business

211 SUMMIT PARKWAY
SUITE 108
BIRMINGHAM AL 35209
US

Mailing Address

211 SUMMIT PKWY
SUITE 108
BIRMINGHAM AL 35209
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1995

4. FEI Number

63-1134816

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

ADEN, TIMOTHY CLINT
4400 HWY 20 E
SUITE 313
NICEVILLE FL 32578

10. Name and Address of New Registered Agent

81 Name

Mark Rushing

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

1270 N. Eglin Pkwy. Suite C-11

83

84 City

Shalimar

FL

85 Zip Code

32579

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 Mark Rushing

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/8/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME KNIPP, WAYNE
STREET ADDRESS 211 SUMMIT PKWY SUITE 108
CITY-ST-ZIP BIRMINGHAM AL 35209

TITLE CSD ☐ DELETE

NAME WOLBACH, CHARLES G
STREET ADDRESS 211 SUMMIT PKY SUITE 108
CITY-ST-ZIP BIRMINGHAM AL 35209

TITLE D ☐ DELETE

NAME POELLNITZ, ROBERT W JR
STREET ADDRESS 211 SUMMIT PKY SUITE 108
CITY-ST-ZIP BIRMINGHAM AL 35209

TITLE VP ☒ DELETE

NAME JACKSON, JANACE H
STREET ADDRESS 211 SUMMIT PKWY SUITE 108
CITY-ST-ZIP BIRMINGHAM AL 35209

TITLE EVPS ☐ DELETE

NAME VANDEGRIFT, GARY
STREET ADDRESS 211 SUMMIT PKWY SUITE 108
CITY-ST-ZIP BIRMINGHAM AL 35209

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/23/99 205-871-7277

CR2E034 (11/98)

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