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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT

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STREET ADDRESS.

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HAL MATHER, INC.

Principal Place of Business Mailing Address 40 MARSH CREEK ROAD 40 MARSH CREEK ROAD AMELIA ISLAND FL 32034 AMELIA ISLAND FL 32034 3. Date Incorporated or Qualified 3a. Date of Last Report 05/09/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 58-1343609 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Country Zip Country This corporation has liability for intangible tax under s 199.032. 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **81** Name C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD 83 PLANTATION FL 33324 84 City 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 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, typical or printed name at register art agent and tele if applicable (NOTE: Registered Agent signature recurred when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 100 1. 1 TITLE **∑** Change Addition HAL NAME MATHER MATHER, HAL F 1.2 NAME CR2E034 40 MARSH CREEK RD STREET ADDRESS 4412 PACES BATTLE, N.W. 13 STREET ADDRESS CHTY-S!-ZP ATLANTA GA 30327 14 CITY-ST-ZIP AMELIA ISLAND FL 32034 DELFTE TillE 2 1 TITLE Change Change SEAN MATHER NAME MATHER, JEAN 2.2 NAME 40 MARSH CREEK RD STREET ADDRESS 4412 PACES BATTLE, N.W. 2.3 STREET ADDRESS CITA - \$1 - 218 ATLANTA GA 30327 24 CITY-ST-ZIP AMELIA ISLAND FL32034 DELFTE TIBLE 3 1 THE Change Addition NAME SHEARER, WILLIAM B 3.2 NAME 191 PEACHTREE ST., NE 16TH FLOOR STHEFT ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP ATLANTA GA 30303 3 4 CITY - ST- ZIP DELETE HitE 4. 1 TITLE ☐ Change Addition NAME 4.2 NAME STREET ACCRESS 4.3 STREET ADDRESS CITY - S* - ZIP 44 CITY-ST-ZIP DELETE THE 5 1 TITLE ☐ Change Addition NAME 5.2 NAME STHEEL ADDRESS 5.3 STREET ADDRESS

5.4 CITY - ST- ZIP

63 STREET ADDRESS

64 CITY-ST-ZIP

6 1 TITLE

6.2 NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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.

DELE16

Mather 2/6/66 904-261-6011
ORDINECTOR 2/6/66 GOA-261-6011

Change

Addition

(12/95