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 # F9500002507 (0)

KLG/PAIGE, INC.

Principal Place of Business Mailing Address THE 950 BUILDING 1372 PEACHTREE ST., NE. S 950 S WINTER PARK DR STE 120 ATLANTA GA 30309-3225 CASSELBERRY FL 32707					00					
US	ii rt seior						3. Date incorporated or Qualified 05/23/1995	1	te of Last F	leport
— —	Place of Business	2a. Ma	iling Address				4. FEI Number	<u> </u>		pplied For
21		26	A				58-2175644			ot Applicable
Suite, Ap	II. #, eIC.	27	te, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Sta	ate		y & State				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution		•	to Fees
Zip	Country	Zip	1	Co	untry	/	8. This corporation has liability for i	ntangible	tax under s	. 199.032,
24	25	29		30	_		Florida Statutes	Yes [] No	
	9. Name and Address of Currer	t Registere	d Agent		1		10. Name and Address of New Res	istered #	lgent	
	T CORPORATION SYSTEM				81	Name				
1200 SOUTH PINE ISLAND ROAD					82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
PL	ANTATION FL 33324				83					
					03					
					84	City		FL	85 Zip	Code
agent. I SIGNATURE							ion's board of directors. I hereby accep	DATE	ointment as	registerea
12.	OFFICERS AN	D DIRECTO	RS	13.	·		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	VD		DELETE	1.1	TITLE	Ţ			Change	Addition
NAME	KELLY, JAMES P			1.21	NAME					
STREET ADDRESS	1 1010 1 0 11 11 11 11 11 11 11 11 11 11	E. 100				ADDRESS				
CITY+ST-ZIP	ATLANTA GA 30309		DELETE		CITY - S	ST-ZIP			Change	Addition
MILE	LINDSTOOM DANNY V		□ DECEIE		TITLE				∐. Change	☐ Addilion
NAME STREET ADDRESS	LUNOSTROM, DANNY Y 1372 PEACHTREE ST., NE, ST	F 100			NAME CIDECT	ADDRESS				
CITY - ST - ZIP	ATLANTA GA 30309	L. 100				ST-ZIP				
TITLE	VSD		DELETE	3.1		31-21			Change	Addition
NAME	GEORGE, MARTIN S			1	NAME					
STREET ADDRESS		E. 100				ADDRESS				
CITY - ST - ZIP	ATLANTA GA 30309	-				ST - ZIP				
TITLE	P.D		DELETE	4.1 1	TITLE				Change	Addition
NAME	Paige, Howard W.			4. 2	NAME					
STREET ADDRESS		Dr. ST	E 120	4.3 3	STREE1	ADDRESS				
CITY - ST - ZIP	Casselberry, FL 32	2707	=		CITY-S	ST-ZIP				
TITLE			DELETE	511	TITLE				Change	☐ Addition
NAME				5.21	NAME					
STREET ADDRESS	3			5.3 5	STREET	ADDRESS				
CITY-ST-ZIP	<u> </u>		T prints		CITY - S	ST - ZIP			· ·	
TITLE			DELETE	1	HTLE				∐ Change	Addition
NAME CTOTET ADDRESS	_]				NAME					
						Annotee				

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.

SIGNATURE:

1/17/90

dox-281-6565

FILED

Feb 18 1997 8:00am

Secretary of State