FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000004692 (8)**

1. Corporation Name

LINGER LONGER DEVELOPMENT COMPANY

Principal Place of Business	Mailing Address
100 LINGER LONGER ROAD GREENSBORO GA 30642	100 LINGER LONGER ROAD GREENSBORO GA 30642

3. Date Incorporated or Qualified: **09/25/1995**
3a. Date of Last Report:

2. Principal Place of Business (21): Suite, Apt. #, etc (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc (27): City & State (28): Zip (29): Country (30)

4. FEI Number: **58-1719565** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 _____ DATE _____
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when filing)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVC	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PEACHER, WILLIAM G		1.2 NAME	
STREET ADDRESS	100 LINGER LONGER ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	GREENSBORO GA 30642		1.4 CITY-ST-ZIP	
TITLE	CCEO	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	REYNOLDS, MERCER III		2.2 NAME	
STREET ADDRESS	300 MAIN ST.		2.3 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH 45202		2.4 CITY-ST-ZIP	
TITLE	DVS	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	REYNOLDS, JAMES M III		3.2 NAME	
STREET ADDRESS	2561 EATONTON HWY		3.3 STREET ADDRESS	
CITY-ST-ZIP	GREENSBORO GA 30642		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FISTER, CHRISTOPHER		4.2 NAME	
STREET ADDRESS	2 PLUM ST		4.3 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH 41202		4.4 CITY-ST-ZIP	
TITLE	AST	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MELOT, JOHN Y		5.2 NAME	
STREET ADDRESS	100 LINGER LONGER ROAD		5.3 STREET ADDRESS	
CITY-ST-ZIP	GREENSBORO GA 30642		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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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)(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: _____ JOHN Y. MELOT 6-24-96 7064673151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)