FILED

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90123 023 ***150.00

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

DOCUMENT # F95000005247

1. Corporation Name

WORTHING SOUTHEAST CORPORATION

Principal Place of Business		Mailing Address				L IEDITED LEID ISION ONEN OF		18186 Bliv Har	
800 MT, VERNON HWY		800 MT. VERNON HWY							
#350		#350				DO NOT WRITE IN THIS SPACE			
ATLANTA GA 30328		ATLANTA GA 30328 US			3, Date Incorporated or Qualified				
US		00				10/26/1995			
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		I A	pplied For
	ace or business	26				58-2137462		<u> </u>	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.							Additional
22		27				5. Certificate of Status Desired		Fee F	tequired
City & State		City & State			6. Election Campaign Financing		•	-May Be	
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Count	try		8. This corporation owes the cur	rent year int		odu.
24	25	29	30			Personal Property Tax.	torod	Yes	₩No
	9. Name and Address of Curren	t Registered Agent		81 1	Name	10. Name and Address of New	Kegistereu	Agent	
CT	CORPORATION SYSTEM			°' L'	Name				
	SOUTH PINE ISLAND ROAD		٤	82 3	Street Addre	ess (P.O. Box Number is Not Accept	able)		
	NTATION FL 33324		<u> </u>	83					
	11/11/01/12 55521		Ľ	03					
			8	84 (City		FL	85 Zip	Code
ì			<u>_</u>			protion submits this statement for the		changing if	s registered
44 Dureuant	to the provincions of Sections 607 050:	2 and 607 1508. Florida Statu	the ant sot	กร-ท	remed corpo				
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State	of Florida. Such change was a	authorized t	by the	named corpo e corporation	on's board of directors. I hereby acce	pt the appoi	ntment as r	egistered
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State is im familiar with, and accept the obligation	of Florida. Such change was a	authorized t	by the	named corpo e corporation	on's board of directors. I hereby acce	pt the appoi	ntment as r	egistered
office or n agent. I all SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligat	of Florida. Such change was a tions of, Section 607.0505, Flo	authorized to orida Statut	by the	e corporation	n's board of directors. I heraby acce	pt the appoi	ntment as r	egistered
office or n agent. I all SIGNATURE	egistered agent, or both, in the State (of Florida. Such change was a tions of, Section 607.0505, Floridate of applicable. (NOT	authorized to orida Statut	by the	e corporation	on's board of directors. I hereby acce	DATE	nument as r	ORS IN 12
office or n agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligat Signature, typed or printed name of registered agen	of Florida. Such change was a tions of, Section 607.0505, Floridate of applicable. (NOT	authorized borida Statute	by the tes.	e corporation	on's board of directors, I heraby acce	DATE	nument as r	ORS IN 12
office or n agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligat Signature, typed or printed name of registered agen OFFICERS AN	of Florida, Such change was a tions of, Section 607.0505, Florida in the floridation of t	authorized borida Statute E: Registered Ap	by the tes.	e corporation	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12
office or nagent. I a SIGNATURE 12. TITLE	registered agent, or both, in the State im familiar with, and accept the obligated Signature, typed or printed name of registered agen OFFICERS AN PD ECHOLS, JOHN A	of Florida, Such change was a tions of, Section 607.0505, Florida in the floridation of t	E: Registered A 13. 1.1 TITLE 1.2 NAM	by the tes.	e corporation	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12
office or nagent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligated Signature, typed or printed name of registered agen OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA	of Florida, Such change was a tions of, Section 607.0505, Florida in the floridation of t	E: Registered A 13. 1.1 TITLE 1.2 NAM	by the tes. Sgent sk E E KEET AD	e corporation	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State of m familiar with, and accept the obligated Signature, typed or printed name of registered agen OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350	of Florida, Such change was a tions of, Section 607.0505, Florida in the floridation of t	E: Registered A 13. 1.1 TITLE 1.2 NAM 1.3 STRE	by the tes. Sgent sk E E REET AD Y-ST-ZI	e corporation	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of m familiar with, and accept the obligated Signature, typed or printed name of registered agen OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA	of Florida. Such change was a tions of, Section 607.0505, Fix and title if applicable. (NOTI D DIRECTORS	E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 1.4 CITY	by the tes. Agent sk E REET AD Y-ST-Z	e corporation	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State of m familiar with, and accept the obligated Signature, typed or printed name of registered agen OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA EVST	of Florida. Such change was a tions of, Section 607.0505, Fix and title if applicable. (NOTI D DIRECTORS	E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 1.4 CITY 2.1 TITLE	E REET AD Y-ST-Z	e corporation	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligated of signature, typed or printed name of registered agen OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA EVST FLATTERY, JOHN T	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE	E: Registered At 1.1 TITLE 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITLE 2.2 NAM	Agent ske	e corporation gnature required DDRESS	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of m familiar with, and accept the obligated of printed name of registered agen. OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA EVST FLATTERY, JOHN T 800 MT. VERNON HWY., #350	of Florida. Such change was a tions of, Section 607.0505, Fix and title if applicable. (NOTI D DIRECTORS	E: Registered As 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITLE 2.2 NAM 2.3 STRE	Agent sk Agent sk Agent sk Agent sk Agent sk Agent AD Y-ST-ZI	e corporation gnature required DDRESS	on's board of directors, I heraby acce	DATE	ID DIRECT	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of the familiar with, and accept the obligated in familiar with, and accept the obligated of the oblig	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE	E: Registered At 13. 1.1 TITLE 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CITY	Sent sk E REET AD Y-ST-Z REET AD Y-ST-Z REET AD Y-ST-Z	e corporation gnature required DDRESS	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State of m familiar with, and accept the obligated in familiar with, and accept the obligated of the obligat	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE	E: Registered As 1.1 TITLE 1.2 NAM 1.3 STRI 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITLE 3.2 NAM	by the second se	e corporation gnature required DDRESS	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	registered agent, or both, in the State of the Information of Information of the Informat	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE DELETE	E: Registered As 1.1 TITLE 1.2 NAM 1.3 STRI 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CIT	by the test. E. AE A	e corporation gnature required DDRESS ZIP DDRESS	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State of m familiar with, and accept the obligate of professional series of registered agen of FICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA EVST FLATTERY, JOHN T 800 MT. VERNON HWY., #350 ATLANTA GA D INGRAM, STEVEN L 800 MT. VERNON HWY., #350 ATLANTA GA D ATLANTA GA D ATLANTA GA D INGRAM, STEVEN L 800 MT. VERNON HWY., #350 ATLANTA GA D	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE	authorized borida Statuti E: Registered As 13. 1.1 TITLE 12 NAM 1.3 STRI 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CITL 3.2 NAM 3.3 STRI 3.4 CITL 4.1 TITLE 4.1 TITL	by the second se	e corporation gnature required DDRESS ZIP DDRESS	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligate of proceeding the obligation of the control of the obligation of the control of the con	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE DELETE	authorized borida Statuti E: Registered As 1.1 TITLE 1.2 NAM 1.3 STRI 2.4 CITY 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITLE 4.2 NAM	by the second se	e corporation gnature required DDRESS ZIP DDRESS ZIP	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE TITLE	registered agent, or both, in the State of the Information of Information of the Information of the Information of the Information of the Information of Infor	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE DELETE	E: Registered As 13. 1.1 TITLE 12 NAM 1.3 STRI 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITLE 4.2 NAM 4.3 STRI 4.2 NAM 4.3 STRI 5.4 S	E. AE REET AD	poress Doress Doress Doress	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of m familiar with, and accept the obligate of projective agents of the obligation of the obligati	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOT! D DIRECTORS DELETE DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITLI 3.2 NAM 3.3 STRI 4.1 TITLI 4.2 NAM 4.3 STRI 4.4 CITY 4.1 TITLI 4.2 NAM 4.3 STRI 4.4 CITY 4.4 CITY 4.4 CITY 4.4 CITY	E. A. E.	poress Doress Doress Doress	on's board of directors, I heraby acce	DATE	ID DIRECT Change Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligate of printed name of registered agen. Signature, typed or printed name of registered agen. OFFICERS AN PD ECHOLS, JOHN A 800 MT. VERNON HWY., #350 ATLANTA GA EVST FLATTERY, JOHN T 800 MT. VERNON HWY., #350 ATLANTA GA D INGRAM, STEVEN L 800 MT. VERNON HWY., #350 ATLANTA GA D MUNGER, RICHARD E 800 MT. VERNON HWY., #350 ATLANTA GA VAS	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOTI D DIRECTORS DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.1 TITLE 22 NAM 2.3 STRI 2.4 CIT 3.1 TITLE 3.2 NAM 3.3 STRI 4.1 TITLE 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITLE 5.1 TITLE 5.1 TITLE	E. A. E.	poress Doress Doress Doress	on's board of directors, I heraby acce	DATE	ID DIRECT Change	ORS IN 12 Addition Addition
office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligated important of the obligation of the	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOT! D DIRECTORS DELETE DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 4.1 TITLE 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITLE 5.2 NAM	E.E. AE E.E	poress Doress ZIP Doress ZIP Doress ZIP	on's board of directors, I heraby acce	DATE	ID DIRECT Change Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS SITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of m familiar with, and accept the obligate of price of the obligation of the property of the obligation of the property of the obligation of the property of the prop	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOT! D DIRECTORS DELETE DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRI 3.1 STRI 4.1 CITY 4.1 TITLE 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITLE 5.2 NAM 5.3 STRI 6.3 STRI	E. A. E.	poress Doress Doress Doress Doress Doress Doress Doress Doress	on's board of directors, I heraby acce	DATE	ID DIRECT Change Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligated important of the obligation of the	of Florida. Such change was a tions of, Section 607.0505, Fix and title if applicable. (NOTID DIRECTORS DELETE DELETE DELETE DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.4 CITY 2.1 TITLE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 4.1 TITLE 4.2 NAM 4.3 STRI 4.1 TITLE 5.1 TITLE 5.2 NAM 5.3 STRI 5.4 CITY 5.4 CITY 5.4 CITY 5.5 STRI 5.4 CITY 5.7 TITLE 5.8 STRI 5.9 CITY 5.1 TITLE 5.2 NAM 5.3 STRI 5.4 CITY 5.4 CITY 5.4 CITY 5.5 TITLE 5.5 CITY 5.6 CITY 5.7 TITLE 5.7 CITY 5.8 CITY 5.9 CITY 5.1 TITLE 5.2 NAM 5.3 STRI 5.4 CITY	E. A. E.	poress Doress Doress Doress Doress Doress Doress Doress Doress	on's board of directors, I heraby acce	DATE	D DIRECT Change	ORS IN 12 Addition Addition Addition
office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligate of price of the obligation of the property of the obligation of the property of the obligation of the property of the prop	of Florida. Such change was a tions of, Section 607.0505, Fix at and title if applicable. (NOT! D DIRECTORS DELETE DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.1 TITLE 2.2 NAM 2.3 STRI 2.4 CITV 3.1 TITLE 3.2 NAM 3.3 STRI 4.1 TITLE 4.2 NAM 4.3 STRI 4.2 TITLE 5.7 TITLE 5.2 NAM 5.3 STRI 5.4 CITV 6.1 TITLE 6.	E.E. AE E.E	poress Doress Doress Doress Doress Doress Doress Doress Doress	on's board of directors, I heraby acce	DATE	ID DIRECT Change Change	ORS IN 12 Addition Addition Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of m familiar with, and accept the obligate of projectored agent of FICERS AN OFFICERS AN OFFICERS AN OFFICERS AN ASOUNT. VERNON HWY., #350 ATLANTA GA EVST FLATTERY, JOHN T 800 MT. VERNON HWY., #350 ATLANTA GA D INGRAM, STEVEN L 800 MT. VERNON HWY., #350 ATLANTA GA D MUNGER, RICHARD E 800 MT. VERNON HWY., #350 ATLANTA GA VAS LEVY, BRITA M 800 MT. VERNON HWY., #350 ATLANTA GA	of Florida. Such change was a tions of, Section 607.0505, Fix and title if applicable. (NOTID DIRECTORS DELETE DELETE DELETE DELETE DELETE	authorized borida Statuti E: Registered A 13. 1.1 TITLE 12 NAM 1.3 STRI 2.2 NAM 2.3 STRI 2.4 CITV 3.1 TITLE 3.2 NAM 3.3 STRI 4.4 CITV 4.1 TITLE 4.2 NAM 4.3 STRI 4.4 CITV 5.1 TITLE 5.2 NAM 5.3 STRI 6.4 CITV 6.1 TITLE 6.2 NAM	LE ALEET ALE ALEET ALE ALEET ALE ALE ALE ALE ALE ALE ALE ALE	poress Doress Doress Doress Doress Doress Doress Doress Doress	on's board of directors, I heraby acce	DATE	D DIRECT Change	ORS IN 12 Addition Addition Addition

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.

6.4 CITY-ST-ZIP

Brita M. Levy - Vice-fres