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 #

F96000003912 (0)

CK-WGV #1, INC.

Principal Place of Business Mailing Address 301 S. COLLEGE STREET 301 S. COLLEGE STREET **SUITE 2800 SUITE 2800 CHARLOTTE NC 28202-8043** CHARLOTTE NC 28202 3. Date Incorporated or Qualified 3a. Date of Last Report 08/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For -APPLIED FOR 58-2251295 Not Applicable 26 21 Suite Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zιρ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City 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. Specifier, types or protest name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. Change Addition DELETE TiT.F 1.1 TITLE MILLER, DAVID S NAME 1.2 NAME R2E034 301 S. COLLEGE STREET, SUITE 2800 1.3 STREET ADDRESS STHEEL ADORESS **CHARLOTTE NC 28202** CITY ST-7/P 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KLEIN, FRED W 2.2 NAME 301 S. COLLEGE STREET, SUITE 2800 2.3 STREET ADDRESS STREET ADDRESS **CHARLOTTE NC 28202** 2.4 CITY-ST-ZIP CHY-\$1-716 DELETE Addition 3.1 TITLE TITLE CHILDRESS, J D NAME 3.2 NAME 300 GALLERIA PARKWAY, N.W., SUITE 600 3.3 STREET ADDRESS STREET ADDRESS ATLANTA GA 30339 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NARRON, ALYSON J NAME 4. 2 NAME 301 S. COLLEGE STREET, SUITE 2800 4.3 STREET ADDRESS STHEE! ADDRESS **CHARLOTTE NC 28202** City-S1-7IP 4.4 CITY-\$T-ZIP DELETE Change Mx Addition 5.1 TITLE TITLE Vice President

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 armual 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.

52 NAME

61 TITLE 62 NAME

53 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

54 CITY-ST-ZIP

SIGNATURE:

NAME

NAME

STREET ADDRESS

STREET ADDRESS OHY \$1-7P

CITY - ST - ZiP

REAL CONNING OFFICE OR DIRECTOR

DELETE

March 31, 1997

Date Deytime Phone 8

Change Addition

Joseph J.C. Mark, Jr.

Charlotte, NC 28202

301 S. College Street, Suite 2800

FILED

Apr 10 1997 8:00am

Secretary of State