FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

CHTY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600004644 (8)

AMERICAN LEGAL MANAGEMENT SERVICES, INC.

Mailing Address Principal Place of Business 133 CARNEGIE WAY #550 133 CARNEGIE WAY #550 ATLANTA GA 30303-1024 ATLANTA GA 30303 3. Date Incorporated or Qualified 3a. Date of Last Report 09/09/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 58-2056611 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GLOVER, JOHN III 2 S ORANGE AVE #120 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 83 Zip Code 84 City 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 Signature type a or protect race, of regalered agent and little dispolatible (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change THE 1.1 TITLE ROSE, ERIC 1.2 NAME NAME 12585 SILVER FOX CT STREET ADDRESS 1.3 STREET ADDRESS ROSWELL GA 30075 1.4 CITY-ST-ZIP C-TY-ST-ZiP DELETE Change Addition 2.1 TITLE 11116 MANSFIELD, D J 2.2 NAME NAME 3444 SOMERSET TRACE 2.3 STREET ADDRESS STREET ADDRESS MARIETTA GA 30067 2. 4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME ALBRIGHT, JOE NAME 11645 HIGHLAND COLONY DR 3.3 STREET ADDRESS STREET ADORESS ROSWELL GA 30075 3.4. City~\$t~2\P CITY: ST-ZIP Change Addition DELETE 4.1 TITLE TITLE CF0 4.2 NAME CRUMPLER, J R MAINE 4.3 STREET ADDRESS 5660 GOLF CLUB DR STREET ADDRESS. 4.4 CITY - ST - ZIP **BRASELTON GA 30517** CHY-ST-ZIF Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP C1*Y-\$1-79 Change DELETE Addition 6.1 TITLE DHE 6.2 NAME NAMI

14. I do hereby contry that the information supplied with this filing ooes 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.

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

(96/6)

FILED

Jan 29 1997 8:00am

Secretary of State