

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 04, 2001 8:00 am**
Secretary of State

05-04-2001 90020 027 ***150.00

DOCUMENT # F96000004749

1. Entity Name

LUKER INC.

Principal Place of Business

Mailing Address

**244 PERIMETER CENTER PKWY.. N.E.
ATLANTA GA 30346-2397****244 PERIMETER CENTER PKWY.. N.E.
ATLANTA GA 30346-2397**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **58-1034573**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
BEKKERS, JOHN
9435 REDBIRD LANE
ALPHARETTA GA 30022-8923** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SMITH, S. TROY
2409 CENTRAL AVENUE
AUGUSTA GA 30904** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEOD
MERRITT, ALLEN C
4238 WEST CLUB LANE, NE
ATLANTA GA 30319-1140** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
WEHNER, JOHN J
3342 QUAKER SPRING RD.
AUGUSTA GA 30907** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
DYSON, DAVID J
601 DENSLEY DR
DECATUR GA 30033** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
WEST, STEPHEN O
2015 RIVERMEADE WAY. NE
ATLANTA GA 30327-2017** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2015 Rivermeade Way, NW ☒ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen O. West, Treasurer**4/23/01**

Date

(770) 393-5273

Daytime Phone #

CR2E034 (10/00)

Attachment

STATE OF FLORIDA
ANNUAL REPORT
LUKER INC.

DDO46424
71 F96000004749

11. OFFICERS AND DIRECTORS - CONTINUED.

TITLE -	D
NAME-	GAYLORD O. COAN
STREET ADDRESS-	5750 HERSHINGER CLOSE
CITY-ST-ZIP-	DULUTH, GA 30097-6429
TITLE -	D
NAME-	MICHAEL A. STIMPERT
STREET ADDRESS-	2969 ROCKINGHAM DR., NW
CITY-ST-ZIP-	ATLANTA, GA 30327-1230

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