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

Mailing Address

121 W TRADE ST. 1900 INTERSTATE TWR

**PROFIT** CORPORATION ANNUAL REPORT

1997

121 w trade st. 1900 interstate twr

Principal Place of Business

NAME

STREET ADDRESS

SIGNATURE:

GRAVES, WILLIAM T

appears in Block 12 or Block 13 if changed

101 N TRYON ST #1900

**CHARLOTTE NC 28246** 

or on an attache



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 10 1997 8:00am

Secretary of State

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000006536 (4)

FAISON INTERNATIONAL DRIVE, INC.

CHARLOTTE NC 28202-5399 CHARLOTTE NC 28202-5399 3. Date Incorporated or Qualified 3a. Date of Last Report 12/13/1996 2. Principal Place of Business 2a. Mailing Address Applied For PLEASE ADO! ATTN: APPLIED FOR Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc LEGAL DEPT. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution П Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 30 29 Florida Statutes Yes No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JOYCE, JOHN M 225 E ROBINSON ST #500 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 B3 84 City Zip Code 85 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 Signating typed or ponted name of registered again and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TIFLE 1.1 THLE Change Addition FAISON, HENRY J NAME 1.2 NAME 121 W TRADE ST, 1900 INTERSTATE TWR STREET ADDRESS 1.3 STREET ADDRESS **CHARLOTTE NC 28202-5399** C-TY - ST- ZiP 1.4 CITY-ST-ZIP DELETE TITLE DP 2.1 TITLE Change Addition NORWOOD, PHILIP W NAVE 2.2 NAME STREET ADDRESS 121 W TRADE ST, 1900 INTERSTATE TWR 2.3 STREET ADDRESS C(1Y - S1 - 7)P CHARLOTTE NC 28202-5399 2.4 CITY-ST-ZIP THE ☐ DELETE 3.1 TITLE Change Addition JACKSON, ALLEN S NAME 3.2 NAME 121 W TRADE ST, 1900 INTERSTATE TWR STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP CHARLOTTE NC 28202-5399 34 CITY-ST-ZIP DELETE THILE 4.1 TITLE Change Addition CULPEPPER, JAMES H IV NAME 4 2 NAME 121 W TRADE ST, 1900 INTERSTATE TWR STREET ADDRESS 4.3 STREET ADDRESS **CHARLOTTE NC 28202-5399** CITY \$1 - ZIP 4.4 CITY-SY-ZIP DELETE III:E 51 TITLE Addition NAME SHIELDS, COY E 52 NAME 121 W TRADE ST, 1900 INTERSTATE TWR STREET ADDRESS **53 STREET ADDRESS** CHARLOTTE NC 28202-5399 CITY \$1-70 5.4 CITY-SY-ZIP TITLE DELETE 300002109043\*\*\* -03/10/97--01051--017

6.1 TITLE

6.2 NAME

ent with an address.

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 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

\*\*\*165.00