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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000006686 (7)

NORRELL RESOURCES CORPORATION

ATLANTA GA 30305

3535 PIEDMONT RD NE

3535 PIEDMONT RD NE

3535 PIEDMONT RD NE

ATLANTA GA 30305

COLE, MADISON F JR

3535 PIEDMONT RD NE

ATLANTA GA 30305

ATLANTA GA 30305

GARNER, KENT

ROSEN, PETER

HAIN, MARK

VCFO

Principal Place of Business Mailing Address 3535 PIEDMONT RD NE 3535 PIEDMONT RD NE ATLANTA GA 30305 ATLANTA GA 30305 Sa. Date of Last Report 3. Date Incorporated or Qualified 12/20/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 58-2207534 26 Not Applicable 21 Suite, Apt. # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zω 8. This corporation has liability for intangible tax under s. 199.032, **₩** No ☐ Yes 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change HILE 1.1 TITLE MILLER, C DOUGLAS NAME 1.2 NAME 3535 PIEDMONT RD NE 1.3 STREET ADDRESS STREET ADDRESS ATLANTA GA 30305 CHTY - \$1 - 70° 1.4 CITY-ST-ZIP DELETE Change ■ Addition 2.1 TITLE 111118 BRYAN, LARRY J 2.2 NAME 3535 PIEDMONT RD NE 23 STREET ADDRESS STREET ADDRESS

2.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

PAM TAYLOR

3586 PIEDMUNT RD

ATIANTA GA 30305

3.4. CITY - ST - ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

X DELETE

DELETE

DELETE

ATLANTA GA 30305

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CITY - ST - ZIP

STREET ACCIDESS

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY ST-ZIP

CITY: ST-ZIE

CITY-ST ZIE

TITLE

NAM:

THLE

PROF

NAME

THUE

NAME

BEQUIRE PAM TAYLOR

4-30-97 (404) 240-300D

Change

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FILED

May 23 1997 8:00am

Secretary of State