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

PROFIT **CORPORATION ANNUAL REPORT** 

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F96000006743 (6)

CONSORT TECHNOLOGIES, INC.

STREET ADDRESS 2700 CUMBERLAND PKWY, STE 300

CITY-ST-ZIP

Principal Place of Business		Mailing Address 2700 CUMBERLAND PARKWAY SUITE 300 ATLANTA GA 30339-3321				T HERITOR CHIS TRING SELLI BRICE COLLEGE STATE SELLIC STATE COLLEGE COLLEGE		
2700 CUMBERLAND PARKWAY SUITE 800 ATLANTA GA 30339								
						Date Incorporated or Qualified     12/24/1996	3a. Date of Last Report	
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number 58-1769437	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			,,	5. Cortificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State 28				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Z(p 29	<b>30</b>	Country			Yes No	
	g. Name and Address of Currer	nt Registered Agent		81		10. Name and Address of New Re	gistered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC.					Name			
1201 HAYS STREET				82 Street A		Address (P.O. Box Number is Not Acceptat	le)	
TÁLLAHASSEE FL 32301				83				
				84	City	FL 85 Zip Code		
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 ogistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida e of Florida. Such change pations of, Section 607.05	Statutes, the was authori 05, Florida S	above ized by Statutes	e-named the cor s.	corporation submits this statement for the poration's board of directors. Thereby acceptances		
SIGNATURE	Signature typod or printed name of registered ag	ent and title if applicable.	(NOTE Regis	lered Age	nt signature	required whorizeinstating)	DATE	
12.		ID DIRECTORS	T 1	3.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TITLE	P	DELET	TE 1	1 11TLE			Change Addition	
NAME	GHAVI, MAHMOUD R		1	2 NAME				
STREET ADDRESS	2849 PACES FERRY ROAD		1.	3 STREFT	ADDRESS	يور المال		
CITY-ST-ZIP	atlanta ga		1.	4 CHY-S	T-ZIP	10002	2143019 /97-01037e-004/atton	
TITLE	V	☐ DELE	TE 2.	1 111LE			/ 3 ( Under Ge - Under Actidition	
NAME	SHERMAN, PEGGY B		2.	2 NAME		क्रकक्र}।	65.00 ****165.00	
STREET ADDRESS	TREET ADDRESS 2700 CUMBERLAND PKWY, STE 300			2.3 STREET ADDRESS		4 (0)(0)(0)(0)(0)(0)	2143019	
CITY-ST-ZIP	ATLANTA GA			4 CITY-5	31-7IP	1 UUUU20		
TITLE	S	<b>⊠</b> DELF1	TÉ 3.	1 TITL <del>E</del>		###5U0 	79701037 <sub>00</sub> -099 30.00 ****385.00	
NAME	<del>OPALDING, WILLIAM R —</del>		3.	2 NAME		***************************************	March Commence of the Commence	
STREET ADDRESS				3 STREET	ADDRESS			
CITY-ST-ZIP	ATLANTA GA			4 CITY-S	ST-ZIP			
TITLE	T	☐ DELE	TE 4.	1 TITLE			Change Addition	
NAME	DICKERSON, CARYN S			2 NAME				
STREET ADDRESS	2700 CUMBERLAND PKWY, ST	TE 300	4	.3 S1REE1	ADDRESS			
CITY-ST-ZIP	ATLANTA GA		4	4 CITY - S	1-7(P	l	[7] ALL [70] 4.5 mg	
TITLE	CD	<b>☐</b> DELE		.1 TITLE		D Jerome H. Baglien	Change X Addition	
NAME	MOCHANIO, FATRICK B			2 NAME			0	
STREET ADDRESS	2700 CUMBERLAND PKWY, ST	TE 300			ADDRESS	2700 Cumberland Parkwa	y, Suite 300	
CITY-ST-ZIP	ATLANTA GA			4 CITY-S	T-ZIP	Atlanta, Ga. 30339	Observed	
TITLE	С	[ ÆLE		A TOLE			☐ Change ☐ Addition	
NAME	MCDOWELL, DAVID E		6	2 NAME			N681.W1	

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 it 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 chapted, or on an attachment with an address.

**FILED** 

Jun 13 1997 8:00am

Secretary of State