

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

FILED
Feb 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000001187 (0)
 1. Corporation Name
SPM, INC. OF ALABAMA



Principal Place of Business PO BOX 55465 BIRMINGHAM AL 35255-5465	Mailing Address PO BOX 55465 BIRMINGHAM AL 35255-5465
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1103 21st Street South Suite, Apt. #, etc. 22 City & State 23 Birmingham, AL Zip Country 24 35205 25 USA		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 01/02/1997	
		4. FEI Number 63-1042087		Applied For Not Applicable	
		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCPT WELDON, WILLIAM B SR	1.1 TITLE	
NAME	1103 21ST ST S	1.2 NAME	
STREET ADDRESS	BIRMINGHAM AL 35205	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DS WELDON, CHARLES V III	2.1 TITLE	
NAME	1103 21ST ST S	2.2 NAME	
STREET ADDRESS	BIRMINGHAM AL 35205	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	S RILEY, DAVID E	3.1 TITLE	
NAME	1103 21ST ST S	3.2 NAME	
STREET ADDRESS	BIRMINGHAM AL 35205	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D FIELD, ROBERT C	4.1 TITLE	
NAME	1103 21ST ST S	4.2 NAME	
STREET ADDRESS	BIRMINGHAM AL 35205	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DV WELDON, WILLIAM EDGAR JR	5.1 TITLE	
NAME	1103 21ST ST S	5.2 NAME	
STREET ADDRESS	BIRMINGHAM AL 35205	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	V OLIVE, GAIL M	6.1 TITLE	
NAME	1103 21ST ST S	6.2 NAME	
STREET ADDRESS	BIRMINGHAM AL 35205	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: 

CF2E034 (10/97)