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

Mailing Address 2102 PIEDMONT ROAD

ATLANTA GA 30324

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700002457 1. Corporation Name

Principal Place of Business

2102 PIEDMONT ROAD ATLANTA GA 30324

UNITED COMPANIES DEVELOPMENT, INC.

ATLANTA ON 30324		ATEMITA ON SOUZY		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
				05/08/1997	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		58-1722742	Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	.,,	27		5. Certifcate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	•	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	ntangible
	25		30	Personal Property Tax.	☐Yes 🗖No
24	9. Name and Address of C		,, ₀ ,	10. Name and Address of New Registered	
	5. Name and Address of C	onent registered Agent	81 Name	,,,,	
CAR	PENTER, RONALD A				
5608 NW 43RD STREET			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
GAINESVILLE FL 32653			83		
GAIN	IESVILLE FL 32033		83		
			84 City		85 Zip Code
				FI	
office or re	egistered agent, or both, in the	7.0502 and 607.1508, Florida Statute State of Florida. Such change was aut obligations of, Section 607.0505, Florid	norized by the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoint	of changing its registered pintment as registered
•	. ,				
SIGNATURE	Signature, typed or printed name of registe	red agent and title if applicable. (NOTE: F	Registered Agent signature require	ed when reinstating) DATE	
12.	OFFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	VICKERS, DAVID M		1.2 NAME		
STREET ADDRESS	2102 PIEDMONT RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30324		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
	VICKERS, JULIE F		2.2 NAME		
NAME	2102 PIEDMONT RD		"		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30324		2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	CFO	☐ DELETE	3.1 TITLE		
NAME	Brewer, Bill		3.2 NAME		
STREET ADDRESS	2102 PIEDMONT RD		3.3 STREET ADDRESS		Ì
CITY-ST-ZIP	ATLANTA GA 30324		3 4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		{
STREET ADDRESS			5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		ì
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
i			6.2 NAME		
NAME			6.3 STREET ADDRESS		ĺ
STREET ADDRESS			0.5 STREET ADDRESS		

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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 29, 1999 8:00 am Secretary of State

05-29-1999 90014 015 ***300.00