

DOCUMENT # F9700003935

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90147 026 \*\*\*150.00

1. Corporation MARRAY  Principal Place 1 RIVERCHASE BIRMINGHAM A	MAITGREEN II, INC. of Business PKWY S.	Mailing Address  1 RIVERCHASE PKWY S. BIRMINGHAM AL 35244			DO NOT WRITE IN		
					3. Date Incorporated or Qualifed 07/28/1997		
Principal Place of Business     2a. Mailing Address					4. FEI Number		Applied For
26					72-1367004		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			_		5. Certificate of Status Desired	<b>T</b>	5 Additional Required
City & State City & State 28					6. Election Campaign Financing Trust Fund Contribution		May Be ed to Fees
Zip 24	Country	Zip	Count 30	ry	This corporation owes the current yes     Personal Property Tax.	ear Intangible	□ No
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Regist	tered Agent	
KALEITA, GARY M 215 N. EOLA DR. ORLANDO FL 32801				Name Street Ad	dress (P.O. Box Number is Not Acceptable)		
			8	33			· ·
				84 City		FI ( )	ip Code
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE: F	Registered A		ed who remaining)	NTE	
		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	Chang	
TITLE	PTDC	☐ DELETE	1.1 TITLE				ge L'Addison
NAME STREET ADDRESS	HARBERT, RAYMOND J 1 RIVERCHASE PKWY., S.		1.2 NAM	EET ADDRESS			
CITY-ST-ZIP	BIRMINGHAM AL 35244		1,4 C/TY	1			
TITLE	VSD	☐ DELETE	2.1 TITLE			☐ Chan	ge Addition
NAME	GRAY, MARQUERITE H		2.2 NAM	E			
STREET ADDRESS	2933 CANTERBURY RD.		2.3 STR	EET ADDRESS			
CITY-ST-ZIP	BIRMINGHAM AL 35223	·	2.4 CIT	Y-ST-ZIP		· ·	
TITLE	S	☐ DELETE	3.1 TITLI	E		Chan	ge
NAME	HARRIS, BRENDA J		3.2 NAM	E			]
STREET ADDRESS	517 CREEKVIEW LANE			EETADORESS			
CITY-ST-ZIP	PELHAM AL 35124			(-ST-ZIP		☐ Chan	ge Addition
TITLE		☐ DELETÉ	4.1 TITL				8- [] \diggs
NAME			4. 2 NAM				
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP		☐ DELETE	_	-ST-ZIP		Chan	ge Addition
TITLE		☐ DELEIK	5.1 TITL 5.2 NAM				g
NAME				FET ADORESS			

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. CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TILE

NAME

205-987-5500

Change

☐ Addition