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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800003203

1. Corporation Name

MCELRATH & OLIVER ARCHITECTS, P.C.

Princ	ipa	I Place	of	Bus	nes
307-A	\$.	FIFTH	ST		

Mailing Address

307-A S FIFTH ST

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90033 023 ***150.00



GADSDEN AL 35901		GADSDEN AL 35901			DO NOT WRITE IN THIS SPACE				
		•			3. Date Incorporated or Qualifed]		
					06/08/1998		-		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For		
402 D	402 DUNCAN STREET 402 DUNCAN STRE				63-1057566		t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\dditional		
22 27				5. Certificate of Status Desired Fee Rec					
City & State City & State					6. Election Campaign Financing	\$5.00	May Ro		
GÁDSDEN, ALABAMA GÁDSDEN, ALA			3AMA		Trust Fund Contribution	Added t			
Zip	3			,	8. This corporation owes the current year	Intangible			
35901	25	29 35901 30	ol .		Personal Property Tax.		XXNo		
	9. Name and Address of Current			10. Name and Address of New Registered Agent					
		<u> </u>	81	Name					
HERZOG, JIM				CO. Co. AAAA (CO. D. Abrahas is Net Assessable)					
1818 W. TENNESSEE ST			82	82 Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32304			83						
			-	Cit		. 85 Zip 0	Code		
			84	City	F	L 3 210 C	Jode		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the abov	e-named	corporation submits this statement for the purpose	of changing its	registered		
office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was auth	orized by	the corpo	oration's board of directors. I hereby accept the app	ointment as re	gistered		
	· · · · · · · · · · · · · · · · · · ·	ions or, because our lobos, richar							
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Re	gistered Age	nt signature re	equired when reinstating) DATE				
12.	OFFICERS AND DIRECTORS 13.			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	P DELETE 1.1 TIT					X Change	☐ Addition		
NAME	MCELRATH, THOMAS M								
STREET ADDRESS	· ·			TADDRESS					
CITY-ST-ZIP	GADSDEN AL 35901 1.4 CIT			T-ZIP	Gadsden, Alabama 35901				
TITLE	S	☐ DELETE	2.1 TITLE	Ī][XChange	☐ Addition		
NAME	OLIVER, DAVID W						ì		
STREET ADDRESS	OLIVEIT, DATID TI			23 STREET ADDRESS 402 Duncan Street					
CITY-ST-ZIP				ST-ZIP	Gadsden, Alabama 35901				
TITLE	DELETE 3.1 TI					Change	☐ Addition		
NAME	32 NA			-					
STREET ADDRESS			3.3 STREE	TADDRESS					
CITY-ST-ZIP				ST-ZIP			1		
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition		
NAME			4. 2 NAME				f		
STREET ADDRESS				TADDRESS			l		
CITY-ST-ZIP			4.4 CITY-S				1		
TITLE		☐ DELETE	5.1 TITLE	11-21		☐ Change	Addition		
NAME			5.2 NAME			_ *	_		
STREET ADDRESS				T ADDRESS					
			5.4 CITY-S		•		ĺ		
CITY-ST-ZIP		□ DELETE	6.1 TITLE			Change	Addition		
1			6.2 NAME			9*			
NAME				T ADDRESS					
STREET ADDRESS	, ;		6.4 CITY O						

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 chapter 607, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RE REDAVIDIM EODIVER, Secretary

4/28/99

256-546-6476