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Jun 01, 1999 8:00 am
Secretary of State

06-01-1999 90009 043 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000003287

1. Corporation Name

Application Profiles, Inc.

Principal Place of Business

9620 Executive Center Dr.,
Ste 202
St. Petersburg, FL 33702

Mailing Address

1000 Alderman Dr.
Alpharetta, GA 30005

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

6/10/98

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

58-2397415

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, FL 32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE Chairman, Director ☐ DELETE
NAME C.B. Rogers, Jr.
STREET ADDRESS 2660 Peachtree Rd
CITY-ST-ZIP Atlanta GA 30305

TITLE President, CEO, Director ☐ DELETE
NAME Derek V. Smith
STREET ADDRESS 15120 N. Valleyfield Rd
CITY-ST-ZIP Alpharetta GA 30004

TITLE Chief Operating Officer ☐ DELETE
NAME Joseph Houlton
STREET ADDRESS 4970 58th Avenue South
CITY-ST-ZIP St. Petersburg, FL 33715

TITLE Exec. VP, CFO, Treasurer, Director ☐ DELETE
NAME Douglas C. Curling
STREET ADDRESS 330 Log House Ct.
CITY-ST-ZIP Roswell GA 30075

TITLE VP, General Counsel, Secretary ☐ DELETE
NAME J. Michael de Jones
STREET ADDRESS 4588 Holstein Hill
CITY-ST-ZIP Norcross, GA 30092

TITLE Asst. Secretary ☐ DELETE
NAME Mary Young
STREET ADDRESS 1290 Old Woodbine Rd
CITY-ST-ZIP Atlanta GA 30319

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 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:

J. Michael de Jones

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/99

Date

Daytime Phone #

CR2E034 (11/98)