## 2000 UNIFORM BUSINESS REPORT (UBR)

## $\mathtt{FILED}$ DOCUMENT # **F98000003298** May 18, 2000 8:00 am Secretary of State IDI SERVICES GROUP, INC. 05-18-2000 90325 032 \*\*\*150.00 Mailing Address Principal Place of Business 3424 PEACHTREE ROAD, SUITE 1500 1424 PEACHTREE ROAD, SUITE 1500 ATLANTA GA 30326-1139 T1 GA 30326 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 58-1891787 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so." Trust Fund Contribution. Added to Fees (See criteria on back) + Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Addition Change TITLE TITLE ☐ Delete GUNTER, TIMOTHY J NAME STREET ADDRESS STREET ADDRESS 3424 PEACHTREE ROAD, SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP atlanta ga 30326 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME CALVERT, BERT S STREET ADDRESS STREET ADDRESS 3424 PEACHTREE ROAD, SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30326 Addition TITLE ☐ Delete TITLE NAME NAME Booker, Linda STREET ADDRESS STREET ADDRESS 3424 PEACHTREE ROAD, SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30326 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME GREGORY, HENRY D JR STREET ADDRESS STREET ADDRESS 3424 PEACHTREE ROAD, SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP <u>atlanta ga 30326</u> Director and Tressurer Change ☐ Addition ☐ Delete TITLE NAME NAME BIRDWELL, DAVID R STREET ADDRESS STREET ADDRESS 3424 PEACHTREE ROAD, SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP atlanta ga 30326 ☐ Addition Change ☐ Delete TITLE TITLE NAME SAWYER, CHRISTOPHER G NAME

13. 1 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TREASURER

1201 WEST PEACHTREE STREET

ATLANTA GA 30309-3424

... DAVID R. BIRDWELL