2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003564 1. Entity Name

WARRIOR CAPITAL CORPORATION

Principal Place of Business

Mailing Address

NORTH 20TH STREET ?----- AL 35203

SIGNATURE:

17 NORTH 20TH STREET BIRMINGHAM AL 35203-4003

				}	E FARTIAR ITTO TRIBE ERSET BOTTE ERSET DE		A CHARLEN	 	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State	COUNTRY 6. Name and Address of Curren CORPORATION SYSTEM SOUTH PINE ISLAND ROAD NTATION FL 33324 The named entity submits this statement of the statement	City & State			4. FEI Number 63-1201350		Applied For Not Applicable		
Zip Country Zip			Country		5. Certificate of Status Desired Service Research			Additional	
	6. Name and Address of Current F	legistered Agent			7. Name and Address of New Rec				
			Name	•					
			Stree	Street Address (P.O. Box Number is Not Acceptable)					
PLAN	ITATION FL 33324					<u>-,</u>			
			City		<u> </u>	FL	Zip Code) ———	
8. The above	named entity submits this statement for	the purpose of changing its	registered office	or registered	d agent, or both, in the State of Florid	da.			
SIGNATURE .						<u>-</u>			
	Signature, typed or printed name of registered agent a	nd title if applicable (NOTE	· Registered Agent sig	nature required w	hen reinstating)	DATE			
Tax filing r	·	FILE NOW! After MAY 1, 20 Make Check Payab		\$550.00	10. Election Campaign Finar Trust Fund Contribution.	ncing		O May Be to Fees	
11. OFFICERS AND DIRECTORS			12.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTORS	IN 11	
TITLE	1 • •	☐ Delete	TITLE				Change	Addition	
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES CITY-ST-ZIP	SS .	•				
TITLE		☐ Delete	TITLE	 - -			Change	Addition	
NAME	TAYLOR, JAMES A JR.		NAME	1		_	•	_	
STREET ADDRESS	17 NORTH 20TH STREET		STREET ADDRES	is					
CITY-ST-ZIP	BIRMINGHAM AL 35203		CITY-ST-ZiP	J					
TITLE	EV.	Delete	TITLE	=			Change	Addition	
NAME	CARTER, DAVID R		NAME						
STREET ADORESS	17 NORTH 20TH STREET		STREET ADDRES	s l					
CITY-ST-ZIP	BIRMINGHAM AL 35203		CITY-ST-ZIP						
TITLE	CFO CFO	☐ Delete	TITLE				Change	☐ Addition	
NAME			NAME						
STREET ADDRESS			STREET ADDRES	is					
CITY-ST-ZIP	BIRMINGHAM AL 35203		CITY-ST-ZIP					<u></u>	
TITLE	-	☐ Delete	TITLE				Change	Addition	
NAME			NAME	- }					
STREET ADDRESS			STREET ADDRES	SS					
CITY-ST-ZIP	• ·	<u>. </u>	CITY-ST-ZIP						
TITLE	}	☐ Delete	TITLE				Change	☐ Addition	
NAME			NAME	_					
STREET ADDRESS			STREET ADDRES	22					
CITY-ST-ZIP		_ 	CITY-ST-ZIP					 	
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receive to trustee empor or on an attachment with an address.	true and accurate and that n	nv signature sha	II have the sa	me legal effect as if made under oat	th: that I am a	n officer (or director	

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

May 31, 2000 8:00 am Secretary of State

Daytime Phone #

05-31-2000 90038 028 ***550.00