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FILED
Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G46249 (0)

1. Corporation Name
FAIRFIELD FORT GEORGE, INC.

Principal Place of Business

2800 CANTRELL RD.
P O BOX 3375
LITTLE ROCK AR 72203

Mailing Address

2800 CANTRELL RD.
P O BOX 3375
LITTLE ROCK AR 72203-3375



3. Date Incorporated or Qualified
06/24/1983

3a. Date of Last Report
02/26/1996

2. Principal Place of Business

21 11001 Executive Center Drive
Suite, Apt. #, etc.

22 City & State
Little Rock, Arkansas

23 Zip Country
72211 USA

24 72211 25 USA

2a. Mailing Address

26 11001 Executive Center Dr.
Suite, Apt. #, etc.

27 City & State
Little Rock, Arkansas

28 Zip Country
72211 USA

29 72211 30 USA

4. FEI Number

59-2344413

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 VAS
NAME GUNTER, JOE T
STREET ADDRESS 2800 CANTRELL ROAD
CITY-ST-ZIP LITTLE ROCK AR

TITLE PD
NAME MCCONNELL, JOHN W.
STREET ADDRESS 2800 CANTRELL ROAD
CITY-ST-ZIP LITTLE ROCK AR

TITLE AS
NAME BENNETT, WILLIAM J.
STREET ADDRESS 2800 CANTRELL ROAD
CITY-ST-ZIP LITTLE ROCK AR

TITLE VSD
NAME DUMENY, MARCEL J.
STREET ADDRESS 2800 CANTRELL ROAD
CITY-ST-ZIP LITTLE ROCK AR

TITLE TCD
NAME HOWETH, ROBERT W.
STREET ADDRESS 2800 CANTRELL RD.
CITY-ST-ZIP LITTLE ROCK AR

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 11001 Executive Center Drive
1.4 CITY-ST-ZIP Little Rock, AR 72211

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 11001 Executive Center Drive
2.4 CITY-ST-ZIP Little Rock, AR 72211

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 11001 Executive Center Drive
3.4 CITY-ST-ZIP Little Rock, AR 72211

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 11001 Executive Center Drive
4.4 CITY-ST-ZIP Little Rock, AR 72211

5.1 TITLE VTB
5.2 NAME Robert W. Howeth
5.3 STREET ADDRESS 11001 Executive Center Drive
5.4 CITY-ST-ZIP Little Rock, AR 72211

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)