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Apr 11 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 # **G55207** (6)

1. Corporation Name
PRI FIRST REALTY CORP.

Principal Place of Business
**FDIC-COLONY SQ.- BOX 68
STE. #2200
ATLANTA GA 30361
US**

Mailing Address
**FDIC-COLONY SQ.- BOX 68
STE. #2200
ATLANTA GA 30301-0068
US**

3. Date Incorporated or Qualified **08/23/1983** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business
21 **FDIC-1201 W. Peachtree St.**

Suite, Apt. #, etc.
22 **Suite 1800**

City & State
23 **Atlanta, GA**

Zip Country
24 **30309 U.S.**

2a. Mailing Address
26 **FDIC-1201 W. Peachtree St.**

Suite, Apt. #, etc.
27 **Suite 1800**

City & State
28 **Atlanta, GA**

Zip Country
29 **30309 U.S.**

4. FEI Number **59-2349472** 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 SOUTH 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	DP	<input type="checkbox"/> DELETE
NAME	TINDALL, FRANK C JR	
STREET ADDRESS	FDIC-COLONY SQ.- BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE	DVAS	<input type="checkbox"/> DELETE
NAME	RAY, PATRICIA J	
STREET ADDRESS	FDIC-COLONY SQ.- BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE	DVAS	<input type="checkbox"/> DELETE
NAME	FARRELL, CHARLES P	
STREET ADDRESS	FDIC-COLONY SQ.- BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE	DST	<input checked="" type="checkbox"/> DELETE
NAME	ROSSETTI, JOHN P	
STREET ADDRESS	FDIC-COLONY SQ.- BOX 68	
CITY-ST-ZIP	ATLANTA GA 30361	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	FDIC-1201 W. Peachtree St., Suite 1800
1.4 CITY-ST-ZIP	Atlanta, GA 30309
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	FDIC-1201 W. Peachtree St., Suite 1800
2.4 CITY-ST-ZIP	Atlanta, GA 30309
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	FDIC-1201 W. Peachtree St., Suite 1800
3.4 CITY-ST-ZIP	Atlanta, GA 30309
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Lawrence W. Lockwood
4.3 STREET ADDRESS	FDIC-1201 W. Peachtree St., Suite 1800
4.4 CITY-ST-ZIP	Atlanta, GA 30309
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 included 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: *Frank C. Tindall, Jr.* **3-18-97**

(404) 817-2578

Frank C. Tindall, Jr., President

Date

Daytime Phone #

CR2E034 (9/96)