FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR -7 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H48777** **(7)**

1. Corporation Name
FREEDOM MARCH 85, INC.

000001452040
-04/10/95--01045--002
****208.75 ****208.75

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
ATTN: SUBSIDIARIES P.O. BOX 30587; 4200 W. CYPRESS ST. TAMPA FL 33622	245 PEACHTREE CTR. AVE. STE 1100 ATLANTA GA 30303 US

3. Date Incorporated or Qualified: **03/25/1985**
3a. Date of Last Report: **04/11/1994**

2. Principal Place of Business
21 245 Peachtree Center Ave
22 Suite 1100
23 Atlanta GA
24 Zip 30303
25 Country USA

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: **59-2664629** ☐ 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	same	☐ Change ☐ Addition
NAME	DAVIS, JOSEPH M	12 NAME		
STREET ADDRESS	245 PEACHTREE CTR AVE, STE 1100	13 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30303	14 CITY-ST-ZIP		
TITLE	DV	21 TITLE	D/VP/AS	☒ Change ☐ Addition
NAME	MCQUEEN, JOHN M	22 NAME	J. Michael Barganier	
STREET ADDRESS	245 PEACHTREE CTR AVE, STE 1100	23 STREET ADDRESS	245 Peachtree Center Ave, Ste. 1100	
CITY-ST-ZIP	ATLANTA GA 30303	24 CITY-ST-ZIP	Atlanta, GA. 30303	
TITLE	DST	31 TITLE	same	☐ Change ☐ Addition
NAME	CORRIGAN, RICHARD	32 NAME		
STREET ADDRESS	245 PEACHTREE CTR, AVE, STE 1100	33 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30303	34 CITY-ST-ZIP		
TITLE		41 TITLE	VP/AS officer only	☐ Change ☒ Addition
NAME		42 NAME	Faye O. Mack	
STREET ADDRESS		43 STREET ADDRESS	245 Peachtree Center Ave. Ste. 1100	
CITY-ST-ZIP		44 CITY-ST-ZIP	Atlanta, GA. 30303	
TITLE		51 TITLE	VP/AS - officer only	☐ Change ☒ Addition
NAME		52 NAME	Deborah Y. Chandler	
STREET ADDRESS		53 STREET ADDRESS	245 Peachtree Center Ave. Ste. 1100	
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE	Atlanta, GA. 30303	☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

4-7-95 MH

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Joseph M. Davis 4/4/95 (404) 230-6786
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number
Joseph M. Davis, President

0000081 CP