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Feb 07 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 # L39406

(8)

1. Corporation Name  
LUDWIG I, FLA. CORPORATION

Principal Place of Business  
% COFER & BEAUCHAMP  
SUITE 200 99 W., PACES FERRY RD. N.W.  
ATLANTA GA 30305

Mailing Address  
% COFER & BEAUCHAMP  
SUITE 200 99 W., PACES FERRY RD. N.W.  
ATLANTA GA 30305-1364



3. Date Incorporated or Qualified 01/02/1990  
3a. Date of Last Report 01/26/1996

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Zip Country 30  
24 25 29 30

4. FEI Number 58-1625974  
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 10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
D	PREYSING, GRAF	SCHLOSS NYMPHENBURG 11	MUNICH, W. GERMANY	11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
D	SCHALL-RIACOUR, GEORG GRAF	SCHUMANNSTR. 10 8	MUNICH GE	21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP
D	COFER, CARL H.	99 W. PACES FERRY RD NW	ATLANTA GA	31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP
				41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP
				51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP
				61 TITLE	62 NAME	63 STREET ADDRESS	64 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

1/29/97  
Date

404-233-6200  
Daytime Phone #

0011562

CR2E034 (9/96)