

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L87660** (1)

1. Corporation Name

COURT HOUSE CENTER, INC.

Principal Place of Business

Mailing Address

**1201 W PEACHTREE ST NE
SUITE 1800
ATLANTA GA 30309-3415
US**

**1201 W PEACHTREE ST NE
SUITE 1800
ATLANTA GA 30309-3415
US**



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 07/18/1990	3a. Date of Last Report 04/17/1995
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0206727	Applied For ☐ Not Applicable ☐
22. City & State	27. City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Country	29. Country	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

**THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301**

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. Zip Code	FL

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 date of appointment

1995. Registered Agent Signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP RAY, PATRICIA J 1201 W PEACHTREE ST NE SUITE 1800 ATLANTA GA CITY-ST-ZIP	1.1 TITLE	DSP Ray, Patricia J. 1201 W. Peachtree St. NE, Suite 1800 Atlanta, GA 30309-3415
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DV CUMMINS, MICHAEL G 1201 W PEACHTREE ST NE SUITE 1800 ATLANTA GA CITY-ST-ZIP	2.1 TITLE	D Cummins, Michael G. 1201 W. Peachtree St., NE, Suite 1800 Atlanta, GA 30309-3415
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DV PAYNE, RICHARD 1201 W PEACHTREE ST NE SUITE 1800 ATLANTA GA CITY-ST-ZIP	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VS NATSON, RONALD 1201 W PEACHTREE ST NE SUITE 1800 ATLANTA GA CITY-ST-ZIP	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	T FERREBEE, SUBRENA 1201 W PEACHTREE ST NE SUITE 1800 ATLANTA GA 15 CITY-ST-ZIP	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	DV Farrell, Charles P. 1201 W. Peachtree St. NE, Suite 1800 Atlanta, Ga. 30309-3415
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplements' 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

Telephone Phone #

CR2E034 (12/95)