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

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-04/10/95--01045--008
****208.75 ****208.75

DOCUMENT # **M62609** **(6)**

1. Corporation Name
APD, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
245 PEACHTREE CTR AVE. STE 1100 ATLANTA GA 30303	245 PEACHTREE CTR AVE. STE 1100 ATLANTA GA 30303

3. Date Incorporated or Qualified: **11/17/1987**
3a. Date of Last Report: **04/11/1994**

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

4. FEI Number: **65-0017102** ☐ 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	DV	11 TITLE	DIVP/AS	☑ Change ☐ Addition
NAME	SMARTT, ROBERT L.	12 NAME	Lamar V. Hallman	
STREET ADDRESS	245 PEACHTREE CTR AVE,STE 1100	13 STREET ADDRESS	245 Peachtree Center Ave. Ste. 1100	
CITY-ST-ZIP	ATLANTA GA 30303	14 CITY-ST-ZIP	Atlanta, GA. 30303	
TITLE	DP	21 TITLE	same	☐ Change ☐ Addition
NAME	MCCULLAGH, RONALD D	22 NAME		
STREET ADDRESS	245 PEACHTREE CTR, AVE. STE 1100	23 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30303	24 CITY-ST-ZIP		
TITLE	DST	31 TITLE	DST	☐ Change ☐ Addition
NAME	STRICKLAND, EDD M.	32 NAME	J. Michael Barrognier	
STREET ADDRESS	245 PEACHTREE CTR AVE. STE 1100	33 STREET ADDRESS	245 Peachtree Center Ave. Ste 1100	
CITY-ST-ZIP	ATLANTA GA 30303	34 CITY-ST-ZIP	Atlanta, GA. 30303	
TITLE		41 TITLE	VP/AS - officer only	☐ Change ☐ Addition
NAME		42 NAME	Deborah Y. Chandler	
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	Faye O. Haack	
STREET ADDRESS		53 STREET ADDRESS	245 Peachtree Center Ave. Ste. 1100	
CITY-ST-ZIP		54 CITY-ST-ZIP	Atlanta, GA. 30303	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

4-7-95 MB

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 any attachment with an address.

SIGNATURE: _____ 4.14.95 404.230.6362
SIGNATURE AND TYPED OR PRINTED NAME OF AUTHORIZED OFFICER OR DIRECTOR — Date — Telephone Number
Ronald D. McCullagh, President

0008000 CP