## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

Mailing Address

## DOCUMENT # M73562

CENTER POINT DEVELOPMENT, INC.

**FILED** Apr 10 1997 8:00am Secretary of State

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2189 DEEP WOO MARIETTA GA 3 US		2189 DEEP WOODS WAY MARIETTA GA 30062-2586 US			:			
••					3. Date Incorporated or Qualified 03/24/1988	3a. Date of Last F 07/08/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	A	pplied For	
21		26			59-2885092		ot Applicable	
Sole, Apt :	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required			
City & State	)	City & State			Election Campaign Financing     Trust Fund Contribution	Added to Fees		
Ζφ <b>24</b>	Country 25	Ζιρ <b>29</b>	Count 30	у		Yes 📈 No	5. 199.032,	
	9. Name and Address of Cur-	rent Registered Agent			10. Name and Address of New Re	glatered Agent		
	HOEFER, SCOTT W		В	1 Name				
	N FERNCREEK AVE SUITE B ANDO FL 32803		8		lress (P.O. Box Number is Not Acceptab	le)		
			8	3				
			8	4 City		FL 85 Zip	Code	
office or n	to the provisions of Sections 607.0 egistered agent, or both, in the St in familiar with, and accept the ob	ate of Florida. Such change was	: authorized	ov the corpora	poration submits this statement for the p ation's board of directors. I hereby accep	urpose of changing at the appointment as	ts registered s registered	
SIGNATURE						DATE		
· · · · · · · · · · · · · · · · · · ·	Storature, typed or pratect care of registered	AND DIRECTORS	13.	geni signatura requ	ulred when reinstating)  ADDITIONS/CHANGES TO OFFICE		RS IN 12	
12.	P	DELETE	1.1 TITLE		7,000,000,000,000,000,000	☐ Change	Addition	
NAME	MARTIN, GARY G		12 NAM					
STREET ADDRESS	2189 DEEP WOODS WAY		13 STRE	ET ADDRESS				
CITY - \$1 - 24P	MARIETTA GA		1.4 CITY	-ST-ZIP				
TILE		DELETE	2.1 TITL			☐ Change	Addition	
NAME:			2 2 NAM	E				
STREET ADDRESS			2.3 STR	ET ADDRESS				
CITY-SI ZIP				-ST-ZIP		F1 2.	T 2 1500	
Tatus		☐ DELETE	3.1 T(TL)			L Change	Addition	
NAME			3.2 NAM					
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TITE F		_ //ttit	5.2 NAM	ļ				
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STREET ADDRESS				-ST-ZIP				
CHY ST ZP		DELETE	61 TITL			Change	☐ Addition	
NAME		<u> </u>	6.2 NAN					
STREET ACRORESS				EET ADDRESS				
CITY - S1 - ZP			1	-ST-ZIP				

14. 1 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.