

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 MAR -9 PM 1:11

**FILING FEE** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
**\$ 188.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company  
**DOCUMENT # M96000000355**

CHARTER, G.P., L.L.C.  
800 MT. VERNON HWY.  
#350  
ATLANTA GA 30328

1a. Principal Place of Business Address

~~800 MT. VERNON HWY.~~  
~~#350~~  
~~ATLANTA GA 30328~~

2. Principal Place of Business

5605 GLENRIDGE DR.  
Suite, Apt. #, etc.  
1010

City & State  
ATLANTA, GA

Zip Country  
30342

2a. Mailing Address

5605 GLENRIDGE DR  
Suite, Apt. #, etc.  
1010

City & State  
ATLANTA, GA

Zip Country  
30342

3. Date Organized or Qualified

09/18/1996

3a. State of Formation

GA

4. FEI Number

☐ Applied For

☐ Not Applicable

5. Date of Last Report

04/21/1997

6. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

8. Name and Address of New Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM LINDSLEY, KELLY T

1117 PERIMETER CENTER WEST ATLANTA GA

MGRM FENELON, CURT

1117 PERIMETER CENTER WEST ATLANTA GA

000002451450--7

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (j), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE

*Kelly T. Lindsley*

KELLY T. LINDSLEY

3/4/98

(404) 847-0111 x111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #



THE UNITED STATES  
CORPORATION  
COMPANY

M96000000355

ACCOUNT NO. : 072100000032

REFERENCE : 733629 5025544

AUTHORIZATION :

*Patricia Pizzuti*

COST LIMIT : \$ 188.75

ORDER DATE : March 9, 1998

ORDER TIME : 2:01 PM

ORDER NO. : 733629-005

CUSTOMER NO: 5025544

CUSTOMER:

Jackson Management Group, Inc.  
5605 Glenridge Drive  
Suite #1010  
Atlanta, GA 30342

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 MAR -9 PM 1:11

ANNUAL REPORT FILING

NAME: CHARTER, G.P., L.L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS:       

*h/k*  
*3/9/98*