	LIABILITY COMPANY INUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF COMPORATIONS 99 MAY - 3 AM H: 32		
FILING F \$ 188.7	EE Annual Report \$100.05 Make Check Payable	00 + \$88.75 C	orporation Supplemental	pplemental Fee			02
Name and of Limited			# M46 -3.		Ī		
Charter, G. P., L. L. C. 1076 Stovall Boulevard Atlanta, GA 30319				1076 Stovall Boulevard Atlanta, GA 30319		levard	
2 Principal	Place of Business	2a. Maihn	ng Address		3. Date Organize	ed or Qualified	3a. State of Formation
Suite, Apt. #,	, etc.	Suite, Apt.	#, etc.		August 28, 1996 Georgia		
City & State		City & Sta	City & State				Applied For Not Applicable
Zip	Country	Zip	Cou	ntry	}	5. Date of Last Report 6. Certificate of Status Desired March 9, 1998 S8 75 Additional Fee Required	
	7. Name and Address of Curr	ent Registered	Agent	Name	Name and Address	s of New Regis	tered Agent/Office
its registered	doffice or registered agent, or both, it diagent, and accept the obligations	16 and 608.508,		Suite, Apt. #, etc			
(Hogotevid A joint According Appendicum) it 10 Title Managing Members/Managers			Business Street Address		(-)		, State and Zip Code
	Kelly T. Lindsley Curt Fenelon		1076 S 48 Ivy	tovall Boule Chase	vard	Atlan	ta, GA 30319 ta, GA 30342
indicated on limited liabilit attachment v	by certify that the information supplied this annual report is true and accurate company or the receiver or truste with an address.	ate and that my si e empowered to e	gnature shall have the execute this report as	ie same legal effect ; required by Chapte	as if made under oath r 608, Fiorida Statute	, that Lam a ma s, and that my n	naging member or manager of the