


FILE NOW: FILING FEE IS \$61.25

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Feb 27, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N36162					
1. Corporation Name FERN PARK, INC.					
Principal Place of Business 230 FERN PARK BLVD. 8751 W. BROWARD BLVD. FERN PARK FL 32730 US			Mailing Address C/O CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 US		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		01/19/1990	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		58-1873945	
24 Country		29 Country		30 Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	COATS, BRYANT G.		1.1 TITLE	CFO	Change Addition	
NAME		3060 P'TREE RD., #1150		1.2 NAME	JOHN R. WEST	Change Addition	
STREET ADDRESS		ATLANTA GA		1.3 STREET ADDRESS	3060 PEACHTREE RD. #1150	Change Addition	
CITY-ST-ZIP		ATLANTA GA		1.4 CITY-ST-ZIP	ATLANTA GA 30305	Change Addition	
TITLE	D	OAKES, HOWARD		2.1 TITLE	GORDON SIMMONS	Change Addition	
NAME		1932 N DRIUD HILLS RD., NE		2.2 NAME	DIRECTOR	Change Addition	
STREET ADDRESS		ATLANTA GA		2.3 STREET ADDRESS	3060 PEACHTREE RD	Change Addition	
CITY-ST-ZIP		ATLANTA GA		2.4 CITY-ST-ZIP	ATLANTA GA 30305	Change Addition	
TITLE	C	COATS, ROBERT B.		3.1 TITLE		Change Addition	
NAME		311 DAWN BROOK DR		3.2 NAME		Change Addition	
STREET ADDRESS		FLT ROCK NC		3.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP		ATLANTA GA		3.4 CITY-ST-ZIP		Change Addition	
TITLE	D	WALKER, WILLIAM P.		4.1 TITLE		Change Addition	
NAME		224 QUAIL LANE LAKE MARTIN		4.2 NAME		Change Addition	
STREET ADDRESS		DADEVILLE AL		4.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP		DADEVILLE AL		4.4 CITY-ST-ZIP		Change Addition	
TITLE	D	LOFTIN, JAMES D. JR.		5.1 TITLE		Change Addition	
NAME		107 FOXBRIAR COURT		5.2 NAME		Change Addition	
STREET ADDRESS		DOTHAN AL		5.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP		DOTHAN AL		5.4 CITY-ST-ZIP		Change Addition	
TITLE	D	BRADEEN, CHET		6.1 TITLE		Change Addition	
NAME		3240 W. HENDERSON ROAD		6.2 NAME		Change Addition	
STREET ADDRESS		COLUMBUS OH 43220		6.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP		COLUMBUS OH 43220		6.4 CITY-ST-ZIP		Change Addition	

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/99

Date

404 364 2900

Daytime Phone #

CR2E037 (1/98)