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FILED

May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01961 (2)
1. Corporation Name
M.E. HUNTER & ASSOCIATES, INC.

Principal Place of Business
1550 NORTHWEST DRIVE. N.W.
ATLANTA GA 30318

Mailing Address
1550 NORTHWEST DRIVE. N.W.
ATLANTA GA 30318



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1984

4. FEI Number

58-1551479

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 3155 NW 77th Ave

Suite, Apt. #, etc.

27 City & State

28 Miami FL

29 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE COB ☒ DELETE
NAME HUNTER, J. MICHAEL
STREET ADDRESS P O BOX 557 (BOGGS MOUNTAIN RD, RRI)
CITY-ST-ZIP TIGER GA 30576-0557

TITLE VT ☒ DELETE
NAME THARPE, R. JOEL
STREET ADDRESS 1385 WOOD POND COVE
CITY-ST-ZIP STONE MTN GA

TITLE P ☒ DELETE
NAME HUNTER, MIKE W.
STREET ADDRESS 403 BEECHWOOD LANE
CITY-ST-ZIP WOODSTOCK GA

TITLE AS ☒ DELETE
NAME ALLEN, OWEN R.
STREET ADDRESS 97 EDDIE LANE
CITY-ST-ZIP MABLETON GA

TITLE S ☒ DELETE
NAME JENKINS, STEPHEN D
STREET ADDRESS 2109 LAUREL HILL DR
CITY-ST-ZIP WOODSTOCK GA 30189

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☒ Addition
1.2 NAME H. Dennis Edwards
1.3 STREET ADDRESS 1550 Northwest Dr. NW
1.4 CITY-ST-ZIP Atlanta GA 30318

2.1 TITLE Vice President ☐ Change ☒ Addition
2.2 NAME Ismael Perera
2.3 STREET ADDRESS 3155 NW 77th Avenue
2.4 CITY-ST-ZIP Miami FL 33122

3.1 TITLE VP + Treasurer ☐ Change ☒ Addition
3.2 NAME Edwin D. Johnson
3.3 STREET ADDRESS 3155 NW 77th Avenue
3.4 CITY-ST-ZIP Miami FL 33122

4.1 TITLE Corporate Secretary ☐ Change ☒ Addition
4.2 NAME Nancy J. Damon
4.3 STREET ADDRESS 3155 NW 77th Ave.
4.4 CITY-ST-ZIP Miami FL 33122

5.1 TITLE Director ☐ Change ☒ Addition
5.2 NAME Jorge Mas
5.3 STREET ADDRESS 3155 NW 77th Avenue
5.4 CITY-ST-ZIP Miami FL 33122

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Michael Hunter

Edwin D. Johnson

CR2E034 (10/97)