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

~PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90126 043 ***150.00

DOCUMENT # P04985

1. Corporation Name

AGRATRADE FINANCING, INC.

Principal Place of Business	Mailing Address			
244 PERIMETER CENTER PKWY, P.O. BOX 2210 ATLANTA GA 30345-2302	244 PERIMETER CENTER ATLANTA GA 30346-2302			
2. Principal Place of Business	2a. Mailing Address			
2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc. 27			

Country

PKWY, P.O. BOX 2210

Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualifed

02/12/1985 4. FEI Number

58-1600157

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

4		25	29	30	<u> </u>			Personal Property 1ax.				
		9. Name and Address of Current F	Registered Age	nt				10. Name and Address of New F	tegistered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD					81 82	Name Street A	Addres	ss (P.O. Box Number is Not Accepte	able)			
					83	_						
PLANTATION FL 33324					63	j				j		
					84	5,			FL	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.												
SIGN	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.		OFFICERS AND		(NOTE: NO	13.	it organization to		ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	FORS IN 12		
TITLE		P		DELETE	1.1 TITLE	₁			☐ Change			
	ì	WOODS, DONALD M.	_	,	1.2 NAME	ļ						
NAME		244 PERIMETER CENTER PKW				TADDRESS				j		
	r ADDRESS [- · · · · · · · · · · · · · · · · · · ·										
CITY-S	T-ZIP	ATLANTA GA		T DELETE	1.4 CITY-S 2.1 TITLE	1-212	_		[] Change	e Addition		
ME	(S DVOOM I DANGE	L] 0000		(_		
NAME	ļ	DYSON, J. DAVID			2.2 NAME							
STREE	T ADDRESS				·	TADDRESS						
CITY-S	T-ZIP	ATLANTA GA] DELETE	2. 4 CITY-5	ST- ZIP			[7] Change	e Addition		
TITLE		1	L	") DEFE !	3.1 TITLE	j			_J ondrig			
NAME		WEST, STEPHEN O.			32 NAME							
STREET	TADORESS	244 PERIMETER CENTER PKW			3.3 STREE	T ADDRESS				Y		
CITY-S	T-ZIP	ATLANTA GA			3.4. CITY-5	ST-ZIP			[-7.0]	- Cladina		
TITLE	[CD	[] DELETE	4.1 TITLE	1			Chang	e		
NAME		STIMPERT, MICHAEL A			4.2 NAME	Į.				1		
STREET	T ADDRESS	244 PERIMETER CENTER PKW			4.3 STREE	T ADDRESS						
CITY-S	T-ZIP	ATLANTA GA			4.4 CITY-S	T-ZIP				_ <u></u> _		
TITLE		D		DELETE	5.1 TITLE	ĺ			Chang	e 🗌 Addition		
NAME	:	Bekkers, John			5.2 NAME					i		
STREE	TADDRESS	ALL SESMINETED OF TEST SIZE			5.3 STREE	TADDRESS				ì		
CITY-S	T-ZIP	ATLANTA GA			5.4 CITY-S	T-ZIP						
TITLE		D	1	DELETE	6.1 TITLE				Chang	e Addition		
NAME		COAN, G O			6.2 NAME							
	T ADDRESS	ALL DEDUCATED ACRITED DIG			6.3 STREE	T ADDRESS				·		
CITY 6	T 71D	ATI ANTA GA			6.4 CITY-S				_			
14.	hereby o	certify that the information supplied with	this filing does	not qualify for th	e exempt	ion stated	l in Se	ection 119.07(3)(i), Florida Statutes.	I further certify that the	e information		

Country

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 onyan artaphyent with an address, with all other like empowered.

SIGNATURE:

J. David Dyson, Secretary

4/28/99

(770) 393-5273

Daytime Phone #

CR2E034 (11/98)

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AGRATRADE FINANCING, INC.

OFFICERS

Michael A. Stimpert Chairman of the Board 2969 Rockingham Dr., N.W. Atlanta, GA 30327-1230

Stephen O. West Treasurer 2015 Rivermeade Way, NW Atlanta, GA 30327-2017

Barbara M. Goetz Assistant Secretary/Treasurer 1339 Paces Forrest Dr. Atlanta, GA 30327-2235 Donald M. Woods President 2601 Stokesley Way Snellville, GA 30078-5954

J. David DysonSecretary601 Densley DriveDecatur, GA 30033-5444

BOARD OF DIRECTORS

Michael A. Stimpert Chairman of the Board 2969 Rockingham Dr., N.W. Atlanta, GA 30327-1230

Gaylord O. Coan 12270 Broadwell Road Alpharetta, GA 30004-4015 John Bekkers 9435 Redbird Lane Alpharetta, GA 30022-8923 $\equiv : : :$

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Stephen O. West 2015 Rivermeade Way, NW Atlanta, GA 30327-2017

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