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FILED
May 21 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # P05028 (6)

1. Corporation Name
PARISIAN, INC.



Principal Place of Business: **750 LAKESHORE PKWY BIRMINGHAM AL 35211**
 Mailing Address: **750 LAKESHORE PKWY BIRMINGHAM AL 35211-4400**

3. Date Incorporated or Qualified: **02/15/1985** 3a. Date of Last Report: **04/24/1996**
 4. FEI Number: **63-0680839** 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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **21** Suite, Apt. #, etc.: **22** City & State: **23** Zip: **24** Country: **25**
 2a. Mailing Address: **26** Suite, Apt. #, etc.: **27** City & State: **28** Zip: **29** Country: **30**

**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: *Gary Smith* DATE: **3/27/97**
Signature of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	<input type="checkbox"/> DELETE	11 TITLE: P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: HESS, DONALD		12 NAME: Donald Hess	
STREET ADDRESS: 750 LAKESHORE PKWY		13 STREET ADDRESS: 750 Lakeshore Pkwy	
CITY-ST-ZIP: BIRMINGHAM AL		14 CITY-ST-ZIP: Birmingham, AL 35211	
TITLE: VST	<input checked="" type="checkbox"/> DELETE	21 TITLE: v/t	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: BAILEY, WARREN		22 NAME: Douglas E. Coltharp	
STREET ADDRESS: 750 LAKESHORE PKWY		23 STREET ADDRESS: 3455 Highway 80 West	
CITY-ST-ZIP: BIRMINGHAM AL		24 CITY-ST-ZIP: Jackson MS 39209	
TITLE: _____	<input type="checkbox"/> DELETE	31 TITLE: v/s	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: _____		32 NAME: Brian J. Martin	
STREET ADDRESS: _____		33 STREET ADDRESS: 750 Lakeshore Parkway	
CITY-ST-ZIP: _____		34 CITY-ST-ZIP: Birmingham,	
TITLE: _____	<input type="checkbox"/> DELETE	41 TITLE: D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: _____		42 NAME: James A Coggin	
STREET ADDRESS: _____		43 STREET ADDRESS: 3455 Highway 80 West	
CITY-ST-ZIP: _____		44 CITY-ST-ZIP: Jackson, MS 39209	
TITLE: _____	<input type="checkbox"/> DELETE	51 TITLE: D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: _____		52 NAME: R. Brad Martin	
STREET ADDRESS: _____		53 STREET ADDRESS: 115 No. Calderwood	
CITY-ST-ZIP: _____		54 CITY-ST-ZIP: ALCOA, TN 37701	
TITLE: _____	<input type="checkbox"/> DELETE	61 TITLE: v	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: _____		62 NAME: Gary Smith	
STREET ADDRESS: _____		63 STREET ADDRESS: 750 Lakeshore Parkway	
CITY-ST-ZIP: _____		64 CITY-ST-ZIP: Birmingham, AL 35211	

14. I do 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: *Gary Smith* **Gary Smith, vice-president** DATE: **3-27-97** TELEPHONE: **205-940-1000**

CR2E034 (9/96)