

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

FILED
Mar 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P06713** (2)
1. Corporation Name
HBO & COMPANY OF GEORGIA

Principal Place of Business 301 PERIMETER CENTER NORTH ATLANTA GA 30346	Mailing Address 301 PERIMETER CENTER NORTH ATLANTA GA 30346
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/12/1985	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 58-1606192		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	25 Country	28 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCALL, CHARLES W	1.2 NAME	
STREET ADDRESS	301 PERIMETER CTR N	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	
TITLE	EVP <input type="checkbox"/> DELETE	2.1 TITLE	PRESIDENT / CO-CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERGONZI, ALBERT	2.2 NAME	
STREET ADDRESS	301 PERIMETER CENTER NORTH	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	2.4 CITY-ST-ZIP	
TITLE	VPAS <input type="checkbox"/> DELETE	3.1 TITLE	SR. VICE PRESIDENT / Asst. Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAPINE, JAY M	3.2 NAME	GENERAL COUNSEL
STREET ADDRESS	301 PERIMETER CENTER NORTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	3.4 CITY-ST-ZIP	
TITLE	VPC <input type="checkbox"/> DELETE	4.1 TITLE	SR. VICE PRESIDENT - FINANCE / <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYERDAHL, TIMOTHY S	4.2 NAME	TREASURER & ACCOUNTING OFFICER
STREET ADDRESS	301 PERIMETER CENTER NORTH	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	4.4 CITY-ST-ZIP	
TITLE	VT <input type="checkbox"/> DELETE	5.1 TITLE	PRESIDENT / CO-CEO / CFO / <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILBERTSON, JAY P	5.2 NAME	SECRETARY TREASURER
STREET ADDRESS	301 PERIMETER CENTER N.	5.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	CHARLES W. MCCALL
STREET ADDRESS		6.3 STREET ADDRESS	301 PERIMETER CENTER N.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	ATLANTA, GA 30346

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 *Timothy S. Heyerdahl*
Timothy S. Heyerdahl
Senior VP Finance & Treasury

CR2E034 (10/97)