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FILED

Feb 10 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 # P07060

(7)

1. Corporation Name:

NIX MANN/PERKINS & WILL, INC.



Principal Place of Business:

1382 PEACHTREE STREET, N.E.  
ATLANTA GA 30309

Mailing Address:

1382 PEACHTREE STREET, N.E.  
ATLANTA GA 30309-3248

2. Principal Place of Business:

21 Suite, Apt. #, etc.

22 City & State:

23 Zip:

25 Country:

2a. Mailing Address:

26 Suite, Apt. #, etc.

27 City & State:

28 Zip:

30 Country:

3. Date Incorporated or Qualified:

08/09/1985

3a. Date of Last Report:

03/20/1996

4. FEI Number:

58-1293037

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

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 of typewritten printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE:

12. OFFICERS AND DIRECTORS

TITLE: PD ☐ DELETE

NAME: NIX, I. LEWIS  
STREET ADDRESS: 1382 PEACHTREE STREET NE  
CITY - ST - ZIP: ATLANTA GA

TITLE: VD ☐ DELETE

NAME: SWORDS, P. GARY  
STREET ADDRESS: 1382 PEACHTREE STREET NE  
CITY - ST - ZIP: ATLANTA GA

TITLE: CSD ☐ DELETE

NAME: MANN, HENRY A.  
STREET ADDRESS: 1382 PEACHTREE STREET NE  
CITY - ST - ZIP: ATLANTA GA

TITLE: V ☐ DELETE

NAME: AYNLEY, STUART  
STREET ADDRESS: 1382 PEACHTREE STREET NE  
CITY - ST - ZIP: ATLANTA GA

TITLE: V ☐ DELETE

NAME: JOHNSON, DAVID C.  
STREET ADDRESS: 1382 PEACHTREE STREET NE  
CITY - ST - ZIP: ATLANTA GA

TITLE: VP ☐ DELETE

NAME: CADRECHA, MANUEL  
STREET ADDRESS: 1382 PEACHTREE ST, NE  
CITY - ST - ZIP: ATLANTA GA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: ☐ Change ☐ Addition

1.2 NAME:

1.3 STREET ADDRESS:

1.4 CITY - ST - ZIP:

2.1 TITLE: ☐ Change ☐ Addition

2.2 NAME:

2.3 STREET ADDRESS:

2.4 CITY - ST - ZIP:

3.1 TITLE: ☐ Change ☐ Addition

3.2 NAME:

3.3 STREET ADDRESS:

3.4 CITY - ST - ZIP:

4.1 TITLE: ☐ Change ☐ Addition

4.2 NAME:

4.3 STREET ADDRESS:

4.4 CITY - ST - ZIP:

5.1 TITLE: ☐ Change ☐ Addition

5.2 NAME:

5.3 STREET ADDRESS:

5.4 CITY - ST - ZIP:

6.1 TITLE: ☐ Change ☐ Addition

6.2 NAME:

6.3 STREET ADDRESS:

6.4 CITY - ST - ZIP:

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/97 404/873-2300

CR2E034 (9/96)