

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **P07465**

(8)

95 FEB 24 PM 4: 06

1. Corporation Name

PERRY & CO. (FLORIDA)

Principal Place of Business

**2635 CENTURY PKWY
SUITE 1000
ATLANTA GA 30345**

Mailing Address

**2635 CENTURY PKWY
SUITE 1000
ATLANTA GA 30345**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	3. Date Incorporated or Qualified	3a. Date of Last Report
22	City & State	27	City & State	09/19/1985	02/03/1994
23	Zip	28	Country	4. FEI Number	Applied For Not Applicable
24	25	29	30	58-1033667	
				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

**LIDSKY, CARLOS
145 EAST 49TH STREET
HIALEAH 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
85	Zip Code

FL

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

Corporation (Typed or Printed Name of Registered Agent and Title) (Typed Name of Registered Agent and Signature)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CDC	1. TITLE		☐ Change	☐ Addition
NAME	PERRY, RICHARD C	2. NAME			
STREET ADDRESS	2635 CENTURY PKWY. STE. 1000	3. STREET ADDRESS			
CITY, ST, ZIP	ATLANTA GA	4. CITY, ST, ZIP			
TITLE	P	21. TITLE		☐ Change	☐ Addition
NAME	CAMPOS, ALEX J	22. NAME			
STREET ADDRESS	2635 CENTURY PKWY. STE. 1000	23. STREET ADDRESS			
CITY, ST, ZIP	ATLANTA GA	24. CITY, ST, ZIP			
TITLE	VTD	31. TITLE		☐ Change	☐ Addition
NAME	PERRY, JOHN F.	32. NAME			
STREET ADDRESS	2635 CENTURY PKWY	33. STREET ADDRESS			
CITY, ST, ZIP	ATLANTA GA	34. CITY, ST, ZIP			
TITLE	V	41. TITLE		☒ Change	☐ Addition
NAME	GRIZZARD, ANDREW J	42. NAME			
STREET ADDRESS	5181 COLLINS AVE., #1007	43. STREET ADDRESS			
CITY, ST, ZIP	MIAMI BEACH FL	44. CITY, ST, ZIP			
TITLE	D	51. TITLE		☐ Change	☐ Addition
NAME	HANSEN, E. LEWIS	52. NAME			
STREET ADDRESS	238 15TH ST. NE #11	53. STREET ADDRESS			
CITY, ST, ZIP	ATLANTA GA	54. CITY, ST, ZIP			
TITLE		61. TITLE		☐ Change	☐ Addition
NAME		62. NAME			
STREET ADDRESS		63. STREET ADDRESS			
CITY, ST, ZIP		64. CITY, ST, ZIP			

TERMINATED

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.032 and 199.034, Florida Statutes. I further certify that I am an officer or director of the corporation or the registered agent or both, and that my signature shall have the same legal effect as if made under oath, and that my signature shall have the same legal effect as if made under oath, and that my signature shall have the same legal effect as if made under oath, and that my signature shall have the same legal effect as if made under oath.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alex J. Campos

2/21/95

(404) 321-5360