

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Aug 29 1997 8:00am  
Secretary of State

<b>* PROFIT CORPORATION ANNUAL REPORT 1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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<b>DOCUMENT # P07466 (6)</b>
1. Corporation Name <b>EVAN M. TERRY ASSOCIATES, P.C.</b>



Principal Place of Business <b>ONE PERIMETER PARK SOUTH SUITE 200 S BIRMINGHAM AL 35243 US</b>	Mailing Address <b>ONE PERIMETER PARK SOUTH SUITE 200 S BIRMINGHAM AL 35243 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>	3. Date Incorporated or Qualified <b>09/19/1985</b>	3a. Date of Last Report <b>05/01/1996</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>	4. FEI Number <b>63-0888357</b>	Applied For <input type="checkbox"/> Not Applicable
City & State <b>23</b>	City & State <b>28</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
Zip <b>24</b>	Country <b>25</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
Zip <b>29</b>	Country <b>30</b>	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>TCHERNESHOFF, KIRK 4130 SW 27TH PLACE CAPE CORAL FL 33914</b>		10. Name and Address of New Registered Agent <b>81 Name Tad Mackie</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>83 2500 Bay Street</b> <b>84 City Sarasota FL 85 Zip Code 34237</b>	
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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. <b>SIGNATURE</b> <i>Tad Mackie</i> <b>Aug. 20, 1997</b> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)	
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12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>SDM</b>	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME <b>SOKOL, MALCOLM L.</b>		1.2 NAME	
STREET ADDRESS <b>70 SILVER LAKE DR</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>CROPWELL AL</b>		1.4 CITY-ST-ZIP	
TITLE <b>PD</b>	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME <b>TERRY, JAMES L.</b>		2.2 NAME	
STREET ADDRESS <b>1224 GREEN GLEN ROAD</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>BIRMINGHAM AL</b>		2.4 CITY-ST-ZIP	
TITLE <b>DV</b>	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME <b>KING, JR N</b>		3.2 NAME	
STREET ADDRESS <b>5809 LOBLOLLY DRIVE</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>BIRMINGHAM AL</b>		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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. <b>SIGNATURE</b> <i>Mackie</i> <b>August 22 1997</b> (25)972-9111
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CR2E034 (4/97)