

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P13229** (0)

1. Corporation Name

SHERMAN INTERNATIONAL CORP.



Principal Place of Business

**1400 URBAN CENTER DRIVE
SUITE 200
BIRMINGHAM AL 35242**

Mailing Address

**1400 URBAN CENTER DRIVE
SUITE 200
BIRMINGHAM AL 35242**

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified
02/12/1987

3a. Date of Last Report
03/21/1995

4. FEI Number

63-0944918

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

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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, typed or printed name of registered agent and official capacity

(NOTE: Registered Agent signature required when re-statuting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	HOLTON, J. THOMAS	
STREET ADDRESS	2131 MAGNOLIA AVE., S.	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	S	☐ DELETE
NAME	HAMILTON, WILLIAM F., JR	
STREET ADDRESS	2131 MAGNOLIA AVE., S.	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	T	☒ DELETE
NAME	WHITT, WILLIAM O'NEAL JR	
STREET ADDRESS	2131 MAGNOLIA AVE., S.	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	VP	☐ DELETE
NAME	RODGERS, DANIEL R.	
STREET ADDRESS	2131 MAGNOLIA AVENUE SO.	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	VP	☐ DELETE
NAME	ANDERSON, FRANK Y., IV	
STREET ADDRESS	2131 MAGNOLIA AVE., S.	
CITY-ST-ZIP	BIRMINGHAM AL	
TITLE	VP	☐ DELETE
NAME	O'NEILL, JOHN	
STREET ADDRESS	2131 MAGNOLIA AVE S	
CITY-ST-ZIP	BIRMINGHAM AL	

1. TITLE	CEO, Director	☒ Change ☐ Addition
2. NAME		
3. STREET ADDRESS	1400 Urban Center Dr., Suite 200	
4. CITY-ST-ZIP	Birmingham, AL 35242	
5. TITLE	Vice President	☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS	1400 Urban Center Dr., Suite 200	
8. CITY-ST-ZIP	Birmingham, AL 35242	
9. TITLE	Vice President	☐ Change ☒ Addition
10. NAME	Alan Curtis	
11. STREET ADDRESS	1400 Urban Center Dr., Suite 200	
12. CITY-ST-ZIP	Birmingham, AL 35242	
13. TITLE	Daniel L. Rodgers	☒ Change ☐ Addition
14. NAME		
15. STREET ADDRESS	1400 Urban Center Dr., Suite 200	
16. CITY-ST-ZIP	Birmingham, AL 35242	
17. TITLE	President, Director	☒ Change ☐ Addition
18. NAME		
19. STREET ADDRESS	1400 Urban Center Dr., Suite 200	
20. CITY-ST-ZIP	Birmingham, AL 35242	
21. TITLE	Director Only	☒ Change ☐ Addition
22. NAME		
23. STREET ADDRESS	1400 Urban Center Dr., Suite 200	
24. CITY-ST-ZIP	Birmingham, AL 35242	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/96

205-570-7500
Telephone

CR2E034 (12/95)