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

CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P16108 SPM PROPERTIES, INC.

(3)

**FILED** Jan 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					
330 CAMPBELL DRIVE 70 IND BLVD.					
CAMILLA GA 31730 CAMILLA GA 31730					
		US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				09/24/1987	
_ ~~	Place of Business	2a. Mailing Address	11 44	4. FEI Number Applied For	
21 270	O Powell Sti		ell Sti	<b>58-1699273</b> Not Applicable	ole
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired  \$8.75 Additional	
22 27 City & State City & State				Fee Required	_
23 Can	11/19 00.	City & State Camilla	Gai	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees	
24 Zip 3/7	30 25 Mitchell	29 3/730 3	Country foller	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
CT CORPORATION SYSTEM 81 Name					
1200 S. PINE ISLAND ROAD				Address (P.O. Box Number is Not Acceptable)	$\dashv$
PLANTATION FL 33324				nadios (1.10. Dox Hambor is the Acceptacity	
			83		$\neg$
			84 City	■■ 85 Zip Code	$\dashv$
			City	FL   S   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.					
agent, i a	egistered agent, or both, in the State im familiar with, and accept the oblig	i of Florida. Such change was au jations of, Section 607.0505, Flori	tnorized by the corpo da Statutes.	poration's board of directors, i nereby accept the appointment as registered	
SIGNATURE					
	Signature, typed or printed name of registered ag		Registered Agent signature r		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD PALMER, JOE M.	☐ DELETE	1,1 TITLE	Change Additio	ות מנ
NAME	7 MAC ARTHUR DRIVE		1.2 NAME		
STREET ADDRESS	CAMILLA GA		1.3 STREET ADDRESS		- 1
CITY-ST-ZIP	VD VD	D DS: UTS	1.4 CITY-ST-ZIP	The same that th	-1
TITLE	· <del>-</del>	☐ DELETE	2.1 TITLE	1 Change L Addition	ין חכ
NAME	STEVENSON, EARL, JR. 3163 LARAMIE DRIVE		2.2 NAME		
STREET ADDRESS	ATLANTA GA		2.3 STREET ADDRESS		
CITY-ST-ZIP	S	- Delete	2. 4 CITY - ST- ZIP	10	
TITLE	MASSEY, SAMMY K	L DELETE	3.1 TITLE	See. Addition	on
NAME	RT BOX 99		3.2 NAME	Massal Sammy Ki	- 1
STREET ADDRESS	CAMILLA GA		3.3 STREET ADDRESS	3760 Live Gar La	
CITY-ST-ZIP	CAMILLA GA	- Lagrage	3.4 CITY-ST-ZIP	SCC. Knappe Addition Massay Sammy K, 3760 Live Oak La. Cam's 11a, Can 31730	_
TITLE		☐ DELETE	***************************************	Change Addition	ן יינ
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY-ST-ZIP	Change Addition	_
TITLE		☐ pereie	5.1 TITLE	Change L. Addition	"
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST-ZIP	<u> </u>	DELETE	5.4 CITY-ST-ZIP	Change Addition	_
TITLE			6.1 TITLE	Li Change L. Addition	AI
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		- 1
CITY-ST-ZIP	portific that the information of the first	ith this filing does not available for	6.4 CITY-ST-ZIP	d in Section 110 07(2)(i) Florida Statuton   Souther and 5, that the information	$\dashv$
14- Hereby C	entry that the information supplied w	in this ming does not quality for	the exemption stated	d 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 it made under earn; that it aim at 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: