PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P19477

(9)

1. Corporation ARTRA	AC CORPORATION	(9)			
Principal Place	of Business	Mailing Address			ERLE FRAN STATE DERFY BIRTH OTHER BERTH BIRTH FORE
2700 CUMBERLAND PKWY STE. #300 ATLANTA GA 30339		2700 CUMBERLAND F STE. #300 ATLANTA GA 30339	KWY		
		ALDINIA DA GOGO		 Date Incorporated or Qualified 06/02/1988 	3a. Date of Last Report 05/01/1995
-	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21 Suite, Apt. #	# otc	Suite, Apt. #, etc.		58-1753105	Not Applicable
22	r, 00.	27 Suite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	¬ \$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζιρ	Country	B. This corporation has liability fo	
24	25 Same and Address of Court	29	30		es 🔼 No
	9. Name and Address of Curre	ent Hegistered Agent	81 Name	10. Name and Address of New	Registered Agent
1201 H/ SUITE 1	RENTICE-HALL CORPORATION AYS STREET 105 HASSEE FL 32301	SYSTEM, INC.		ddress (P.O. Box Number is Not Accepta	able)
SIGNATURE -	Signature, typed or printed name of registered age	int and title if applicable. (NO	TE: Registered Agent signature risk		DATE
12.	,	ND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
T:TLE NAME	D Brown, Randolph G.	☐ DELETE		V/S	Change X Addition
	ADA 611 ADD 1 114 BUILD 1 114 BUILD 1			Spalding, William R.	
STREET ADDRESS	ATLANTA GA	#300		2700 Cumberland Pkwy	, #300
CITY-ST-ZIP TITLE	CEOD	□ DELETE	I	Atlanta, GA 30339	Change El Addition
NAME	BYERLY, DENNIS R.		i	V Olember 1	Change Addition
STREET ADDRESS	5990 OAKBROOK PKWY			Sherman, Peggy B.	#200
CITY-ST-ZIP	NORCROSS GA			2700 Cumberland Pkwy.	, #300
TITLE	SVPD	DELETE	3. 1 TITLE	Atlanta, GA 30339	Change Addition
NAME	COTE, MICHAEL R		3.2 NAME		
STREET ADDRESS	2700 CUMBERLAND PKWY	#300	3.3. STREET ADDRESS		
C-TY-ST-ZIP	ATLANTA, GA		34 CITY-ST-ZIP		
TITLE	VS /	∑ DELETE	4 1 TITLE		Change Addition
NAME	toppèr, pámela s.		4 2 NAME		
STREET ADDRESS	2700 CUMBERLAND PKWY		4.3 STREET ADDRESS		
CITY - ST - ZIP	ATL∕ANTA GA		4.4 CITY-SI-ZIP		
TITLE	P	☐ DELETE	5 1 TITLE	-	Change Addition
NAME	PITTMAN, JULIAN V		5.2 NAME		
STREET ADDRESS	5990 OAKBROOK PKWY		5.3 STREET ADDRESS		
CITY-SI-ZIP	NORCROSS GA		5.4 CITY-ST-ZIP		
TIFLE		DELETE	6 1 TiTLE		Change Addition
NAME CTUSES ADDRESS	DICKERSON, CARYN S		6.2 NAME		
STREET ADDRESS	2700 CUMBERLAND PKWY		6.3 STREET ADDRESS		
CITY-ST-ZIP	atlanta ga		6.4 CITY - ST - ZIP		

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:

4/5/96

(770) 319-3300

Assoc. General Counsel

Daytime Phone #

CR2E034 (12/95)