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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name

(9)

LAING NORTHSHORE, INC.

Principal Place of Business

Mailino Addross

FILED May 06 1998 8:00am Secretary of State



5901-8 PEACHTREE DUNWOODY RD. STE #555 ATLANTA GA 30328		5901-8 PEACHTREE DUNWOODY RD. STE #555 ATLANTA GA 30328			#555	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/27/1989			
	Place of Business	2a. Mailing Address	iling Address			4. FEI Number	Aj	oplied For	
21		26				<u>58-1856745</u>		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired			
City & Stat	o .	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country 25	Zip 29	Count	ry		8. This corporation owes or has paid the curre	nt year Int		
	9. Name and Address of Curren		100			10. Name and Address of New Registered A		110	
CT	CORPORATION SYSTEM		8	1 Na	ame				
1200 \$. Pine Island road Plantation FL 33324				2 St	Street Address (P.O. Box Number is Not Acceptable)				
	ATTICLE TO COL		8	3					
	•		8	4 Ci	ity	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 ago			gent sig	nature required v	when reinstating} DATE			
12,	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND I			
TITLE	TD Bright, Joanna KM	[_] DELETE	1.1 TIFLE			L	_ Change	☐ Addition	
NAME OXOCCE ADDRESS	5901B PEACHTREE DUNWOO	inv	1.2 NAM						
STREET ADORESS CITY-ST-ZIP	ATLANTA GA	D1	1.3 STRE						
TITLE	VO	DELETE	1.4 CITY -				Change	Addition	
NAME	Q ILLESPIE, JAMES A		2.2 NAME			_			
STREET ADDRESS	SALID BELOUDDER DUNKNOODU			2.3 STREET ADDRESS					
CITY-ST-ZIP	a tlanta ga		2. 4 CITY	- S1 - ZIF	,				
TITLE	\$ D	☐ DELETE	3.1 TITLE				Change	Addition	
NAME	\$TUBBS, ROBERT R.		3.2 NAME	-					
STREET ADDRESS 5901B PEACHTREE DUNWOODY			3.3 STREI	3.3 STREET ADDRESS				İ	
CITY-ST-ZIP	ATLANTA GA		3 4. CITY	-ST-ZIF			_		
TITLE	TD	L_ DELETE	41 THLE		PD		Change	Addition	
NAME	BRIGHT, JOANNA K		4. 2 NAM			LMES, NED S			
STREET ADDRESS	8091B PEACH DUNWOODY ALTANTA GA		4.3 STAE			01 PEACHTREE DUNWOODY			
CITY-ST-ZIP TITLE	VD	DELETE	4.4 CITY -		AT	LANTA GA 30328	Change	Addition	
NAME	BARRIE, GEORE	X Deceie	5.1 THEE			· L	1 rusufis	LI AUDIDON	
STREET ADDRESS 5901 B PEACHTREE DUNWOODY RD STE 555			5.2 NAME 5.3 STREE		rec				
CITY-ST-ZIP	ATLANTA GA	TE NO VIE VVV	5.4 CITY -						
TITLE	t the same of the transfer of the same of	DELETE	6.1 TITLE			T	Change	Addition	
NAME			6.2 NAME			-	_ vimilgo		
STREET ADDRESS			6.3 STREE		ESS				
CITY-ST-ZIP			6.4 CITY-						

Thereby 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 arrival report is five and accorate 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 of the receive of the stee dynamics of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or you an attact might with an arrival state.