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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P23599

(4)

Principal Place 220 FISK DRIVE ATLANTA GA 3	E. 8.W.	Mailing Address 220 FISK DRIVE, S.W. ATLANTA GA 30336-2710		***************************************	,				
						 Date Incorporated or Qualified 03/28/1989 	3a. Date of L 04/30/19		port
······	ace of Business	2a. Mailing Address	ling Address			4. FEI Number Applied For 58-1095344 Not Applicable			
21 Suite, Apt	#, etc.	26 Suite, Apt. #, etc.				- \$9.75 Additional			
22		27				5. Certificate of Status Desired	Ŭ `F	ee Rec	quired
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23 Zip	Country	Zip	Count	ry		This corporation has liability for in			
24	25 29 30			Florida Statutes Yes No					
	9. Name and Address of Curr	ent Registered Agent		11 1	Name	10. Name and Address of New Reg	gistered Agent		
	LEE, JAMES E.		0	Ϊ.					
600 SUEMAC ROAD SUITE #4			8	2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
	SONVILLE FL 32205		8	3					
•			8	4 (City	<u></u>	—. 85	Zip C	ode
	The second secon				•	oration submits this statement for the pon's board of directors. I hereby accep	- FL		
SIGNATURE 12. THE NAME	OFFICERS A P OYLER, DAVID		13. 1.1 TITLE	Agent E	signature require	nd when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	CTORS	
STREET ADDRESS CITY+ST-ZIP	220 FISK DRIVE ATLANTA GA		1.3 STRE 1.4 City						
TITLE	SV	DELETE	2.1 TITLE	_	<u> </u>		☐ CF	ange	☐ Addition
NAME	CURLEE, JAMES		2.2 NAM	E					
STREET ADDRESS	220 FISK DRIVE		2.3 STRE	ET AD	DDRESS				
C(1Y-S1 Z)I	ATLANTA GA	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE				Ct		Addition
TOTLE NAME		D ptreis	3 2 NAM					ka ige	L Naovioli
STREET ADDRESS			33 STAE		DRESS				
CDV SE-762			3.4. DITY						
101.F				E			☐ CI	ange	Addition
NAME			4.2 NAM	Æ	1				
STREET ADDRESS			4.3 STRE	ET AD	DORESS				
Cary S1 - 200			4.4 CITY		21P				
THE		☐ DELETE	5.1 Tifle				LL Ch	iange	Addition
NAME			5.2 NAM						
STREET ADDRESS			5.3 STRE						
1017-S1 719		DELETE	5.4 City 6.1 Titus		ZiP*		☐ CI	nance	Addition
HMAN		hand Others	6.2 NAM					-	
STREET ADORESS			6.3 STRE		DORESS				
GHY-\$1-ZIF			6.4 CITY						
14. I do hereb informatio I ani an o	on indicated on this annual report of	or supplemental annual report is true or the receiver or trustee empower	y for the ex ue and ac	xem	ption stated ate and that	in Section 119.07(3)(i), Florida Statute: my signature shall have the same legal t as required by Chapter 607, Florida S TAMES E. CARLI	l effect as if ma tatutes; and tha	de und	der oath; that

SIGNATURE:

JAMES E. CURLEE, V.P.

FILED

Apr 22 1997 8:00am

Secretary of State