

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # **P34496** (0)

1. Corporation Name
THE PROFIT RECOVERY GROUP INTERNATIONAL I, INC.



Principal Place of Business
**2300 WINDY RIDGE PKWY.
 STE. 300. N.
 ATLANTA GA 30339-8426
 US**

Mailing Address
**2300 WINDY RIDGE PKWY.
 STE. 300. N.
 ATLANTA GA 30339-8426
 US**

3. Date Incorporated or Qualified
06/27/1991

3a. Date of Last Report
09/22/1995

2. Principal Place of Business
21 2300 WINDY RIDGE PKWY.

2a. Mailing Address
26 2300 WINDY RIDGE PKWY.

4. FEI Number
58-1917267

Applied For
 Not Applicable

Suite, Apt #, etc
22 SUITE 100, NORTH

27. SUITE 100, NORTH

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State
23 ATLANTA, GEORGIA

28. ATLANTA, GEORGIA

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip
24 30339-8426

Country
25 US

Zip
29 30339-8426

Country
30 US

8. This corporation has liability for intangible tax under s. 190.032 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 of Registered Agent (Required when changing agent and office address)

(NOTE: Registered Agent signature is required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	TOMA, JOHN M.
STREET ADDRESS	2300 WINDY RIDGE PARKWAY
CITY-ST-ZIP	ATLANTA GA 30339-8426
TITLE	D <input type="checkbox"/> DELETE
NAME	COOK, JOHN M.
STREET ADDRESS	1250 POWERS FERRY ROAD
CITY-ST-ZIP	MARIETTA GA
TITLE	D <input type="checkbox"/> DELETE
NAME	GOLDEN, JONATHAN
STREET ADDRESS	2800 ONE ATLANTIC CENTER 1201 PEACHTREE ST
CITY-ST-ZIP	ATLANTA N GA 30309-3400
TITLE	D <input type="checkbox"/> DELETE
NAME	COHEN, JOHATHAN
STREET ADDRESS	6195 BARFIELD RD., # 280
CITY-ST-ZIP	ATLANTA GA 30328
TITLE	D <input type="checkbox"/> DELETE
NAME	FIAL, CHARLES T
STREET ADDRESS	290 KIOWA PLACE
CITY-ST-ZIP	BOULDER CO 80303
TITLE	D <input type="checkbox"/> DELETE
NAME	GRIEMAN, GARTH
STREET ADDRESS	ONE BOSTON PLACE., SUITE 3425
CITY-ST-ZIP	BOSTON MA 02108-4401

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	TOMA, JOHN M.
3. STREET ADDRESS	2300 WINDY RIDGE PKWY, SUITE 100 NORTH
4. CITY-ST-ZIP	ATLANTA, GEORGIA 30339-8426
2.1 TITLE	C P <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	COOK, JOHN M.
2.3 STREET ADDRESS	2300 WINDY RIDGE PKWY, SUITE 100 NORTH
2.4 CITY-ST-ZIP	ATLANTA, GEORGIA 30339-8426
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	COHEN, STANLEY
4.3 STREET ADDRESS	6195 BARFIELD ROAD, #280
4.4 CITY-ST-ZIP	ATLANTA, GEORGIA 30328
5.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	FIAL, T. CHARLES
5.3 STREET ADDRESS	9635 AVOCET LANE
5.4 CITY-ST-ZIP	LAFAYETTE, CO 80026
6.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	GREIMANN, GARTH
6.3 STREET ADDRESS	ONE BOSTON PLACE, SUITE 3425
6.4 CITY-ST-ZIP	BOSTON, MA 02108-4401

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13-I changed, or on an attachment with an address.

SIGNATURE: *Jerry W. Mello* *Tom G. Mills*, Senior Vice President, Legal Affairs
 DATE: **6/27/96** (1770) 987-8676
 SEE ATTACHED SCHEDULE A FOR REMAINDER OF OFFICERS AND DIRECTORS

CR2E034 (3/96)

SCHEDULE A
TO
FLORIDA PROFIT CORPORATION ANNUAL REPORT 1996
THE PROFIT RECOVERY GROUP INTERNATIONAL I, INC.

13. ADDITIONS TO OFFICERS AND DIRECTORS IN 12 (CONTINUED)

ADDITIONS TO OFFICERS AND DIRECTORS IN 12	
7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Lowrey, E. James 1390 Enclave Parkway Houston, Texas 77077
8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Lachotzki, Fred W.I. Straatweg, 3621 BG Breukelen The Netherlands
9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-ST-ZIP	VP T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Ellis, Donald E. 2300 Windy Ridge Pkwy., Ste. 100 Atlanta, Georgia 30339-8426
10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY-ST-ZIP	V S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Tony G. Mills 2300 Windy Ridge Pkwy., Ste. 100 Atlanta, Georgia 30339-8426
11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Jorge E. Cora 2300 Windy Ridge Pkwy., Ste. 100 Atlanta, Georgia 30339-8426
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition David A. Brookmire 2300 Windy Ridge Pkwy., Ste. 100 Atlanta, Georgia 30339-8426