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 # P36537

(9)

MANAGEMENT SEARCH, INC.

FILED

96 SEP -3 PH 12: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business		Ma	Mailing Address				500	001	9:	53455	
	S TOWER AVE.		2500 MARQUIS TOWER AVE. 245 PEACHTREE CENTER AVE.				-09/23/9601015011 ****383,75 ****383,75				
245 PEACHTREE CENTER AVE. ATLANTA GA 30303-1222			ATLANTA GA 30303-1222			3. Date Incorporated or Qualified					
	ace of Business	<u> </u>	Mailing Address				4, FEI Number 58-1026279		<u> </u>	Applied For Not Applicable	
Suite Apt #, etc.		26	Suite, Apt #, etc							.75 Additional	
22	, 010.	27					5. Certificate of Status Dosired	M	F	ee Required	
City & State	· · · · · · · · · · · · · · · · · · ·		City & State				6. Election Campaign Financing	[]		5. 00 May Be	
:3		28					Trust Fund Contribution	<u>-</u>		dded to Fees	
Zip	Country	\vdash	Zφ	Count	ry		8. This corporation has fability for	intangible t TYes 🔽		der s. 199.032,	
4	25	29	ternal Annah	30			Florida Statutes 10. Name and Address of New Re	: <u></u>			
	9. Name and Address of Curr	rent Hegisi	iered Agent	8	11	Name	To. Haine and Address of Novi III	9.5.0.00	9.5		
THE					4						
	NORTH MAGNOLIA ST.			8	2	Street Add	iress (P.O. Box Number is Not Acceptal	oie)			
TAL	LAHASSEE FL 32301			8	13						
					_				85	Zip Code	
				8	4	City		FL	63	2.ip Gods	
12. TITLE	OFFICERS DCP	AND DIREC	DELETE	13. 11 Titul			ADDITIONS/CHANGES TO OFFI	CERS AND		nange Addition	
NAME	LINDBERG, ERIC J.			1.2 NAM		İ					
STREET ADDRESS	245 PEACHTREE CENTER	AVE		1.3 STRE	EET	ADDRESS					
CITY - ST - ZIP	ATLANTA GA			L4 City		I - ZIP	-1 		T ~	hange Additio	
TITLE	VS		▼ DELETE	21 11(1)		Y	15	ام•	_, ,	nange LV Adam	
NAME	ALLEN, RONALD F.	AVE		2 2 NAM		ADORESS A	narles L. Hippenste 45 Reachtree Certe	r Ave			
STREET ADDRESS	245 PEACHTREE CENTER ATLANTA GA	AVE	,	2 4 CIT		CT. 7:P	Hlanta, GA 30	አ ል ጌ			
CITY - ST - ZIP TITLE	AS		DELETE	3 1 TrTL		***	11.0011001011		0	Change Addite	
NAME	TOOLE, RBERT R.			3.2 NAN	Δŀ						
STREET ADDRESS	245 PEACHTREE CENTER	AVE		33 ST#	EEI	ADDRESS					
CITY - ST - ZIP	ATLANTA GA			3.4 CIT		ST - ZIP			7 .	San Tara	
TITLE			DEFELE	4 1 TITL				L.		Change [] Addition	
NAME				4. 2 NAI							
STREET ADDRESS						I ADDRESS					
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TITLE NAME			LJ ordin	5.2 NAM				_			
STREET ADDRESS						LADDRESS					
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NAME				6.2 NAM	ME		1	a a	io.	Ωt.	
STREET ADDRESS						LADDRESS	Ć,	yb 9-	(U)	- 14	
CITY - ST - ZIP				6.4 CH	<u>Y - S</u>	\$1 - 70P					

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 1 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 if clyinged, or given a statishing htwith an address.

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF STAND OF PRINTED NAME OF STAND OF PRINTED NAME OF STANDARD OF STA

(40g) 659-5236

.R2E034 (3/96)