

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P37012 (2)

1. Corporation Name

WILMA SOUTH CORPORATION

Principal Place of Business

Mailing Address

780 JOHNSON FERRY ROAD
SUITE 250
ATLANTA GA 30342
US

780 JOHNSON FERRY RD
SUITE 300
ATLANTA GA 30342



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 typed or printed name of registered agent and then if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME GRAHAM, CHARLES D.
STREET ADDRESS 780 JOHNSON FERRY ROAD, SUITE 250
CITY- ST- ZIP ATLANTA GA

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE V ☐ DELETE

NAME MARSH, SUSAN J.
STREET ADDRESS 780 JOHNSON FERRY ROAD, SUITE 250
CITY- ST- ZIP ATLANTA GA

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE S ☒ DELETE

NAME LEONARD, MARY ELLEN
STREET ADDRESS 780 JOHNSON FERRY ROAD, SUITE 250
CITY- ST- ZIP ATLANTA GA

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Karen S. Graham
3.3 STREET ADDRESS 780 Johnson Ferry Road, Suite 250
3.4 CITY- ST- ZIP Atlanta, GA 30342

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Karen S. Graham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Karen S. Graham

2-5-96
Date

404-252-0070
Daytime Phone #

CR2E034 (12/95)