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 # P37605

(3)

CATER REDDINGTON STAUB	inc.	
Principal Place of Business	Mailing Address	_
3504 SEVENTH AVE., SOUTH	3504 SEVENTH AVE., SOUTH	

FILED Jun 04 1997 8:00am Secretary of State

Principal Plac	te of Business H AVE., SOUTH AL 35222	Mailing Add	dress ITH AVE., SOU' M AL 35222-321				
						3. Date Incorporated or Qualified 02/21/1992	3a. Date of Last Report 03/07/1996
	Place of Business	2a. Mailing	Address			4. FEI Number	Applied For
21 Suite, Apt.	* 010	28 Suito Ar	pt. #, etc.			63-1057711	Not Applicable
22	· #, 0.0.	27	pi. #, 6t6.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
l City & Stat	le	City & S	tate			6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip		Country	/	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29		30			Yes 🔀 No
	9. Name and Address of Currer	nt Registered Ag	ent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered Agent
	CORPORATION SYSTEM			81	Name		
120	O SOUTH PINE ISLAND ROAD			82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)
R PLA	NTATION FL 33324				ļ		
3				83			
				84	City		FL 85 Zip Code
44 Diversiont	to the ere delega of Castlera COZ OEC	20	Clasida Chatuta	a the share		The state of the s	
office or r	registered agent, or both, in the State	a of Florida. Such i	chance was a	uthorized by	v the corpora	poration submits this statement for the pations board of directors. I hereby accept	of the appointment as registered
agent. I a	im familiar with, and accept the oblig	ations of, Section	607.0505, Flo	rida Statute	S.		
SIGNATURE	Signature, typed or printed name of registered age	ans seed sittle it speciments	MOTO	Dockstored A.	ont elegature requ	ared when reinstating)	DATE
12.		D DIRECTORS	, (NOTE	13.	ant eignature rade	ADDITIONS/CHANGES TO OFFIC	
TITLE	P		DELETE	1.1 TITLE			Change Addition
NAME	CATER, FRANK M.			1.2 NAME			
STREET ADDRESS	3504 7TH AVE., SOUTH			1.3 STREET	ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL			1.4 CITY - 9	ST-ZIP		
TITLE	V		DELETE	2.1 TITLE			Change Addition
NAME	STAUB, HUGH M			2.2 NAME			
STREET ADDRESS	3504 7TH AVE S			2.3 STREET	ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL			2. 4 CITY-	ST-ZIP		
TITLE	V		DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	REDDINGTON, MICHAEL			3.2 NAME]		
STREET ADDRESS	3504 7TH AVE., SOUTH			3.3 STREET	ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL			3.4. CITY-	ST-ZIP		
TITLE	•	L	DELETE	4.1 TITLE			Change Addition
NAME		•		4.2 NAME			
STREET ADDRESS				4.3 STREET			_
CITY-ST-ZIP			1 DELETE	4.4 CITY - S	T - ZIP	W/W	d Chance
TITLE		L	DELETE	5.1 TITLE		$M_{P_{i}}$	Change Addition
NAME				5.2 NAME		· / /	£ "
STREET ADDRESS	·			5.3 STREET		//	
CITY-ST-ZIP			DELETE	5.4 CITY - S 6.1 TITLE	IT-ZIP		Change Addition
TITLE	•	L	_ DECETE		-	50000220	BB45
NAME				6.2 NAME	4000000	50000220 -06/11/970102	3011
STREET ADDRESS				6.3 STREET	I .	***S50.00	
14. I do herek	ny certify that the information supplier	d with this filing de	oes not qualify	6.4 CITY - S		d in Section 119 07(3)(i) Florida Statute	s I further certify that the

I do nereby defining that the information supplied with this filling 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 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 of 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 ghanged, or on an attackment with abadress.

5/27/97

205-BI23-2BI73