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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

STEVENS & WILKINSON OF GEORGIA, INC.

Principal Place of Business	Mailing Address
100 PEACHTREE ST., N.W., SUITE 2400 ATLANTA GA 30303	100 PEACHTREE 8T., N.W., SUITE 2400 ATLANTA GA 30303
2. Principal Place of Business	2a. Mailing Address

FILED Mar 24 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/14/1992 4. FEI Number Applied For 58-1983539 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD., 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City Zip Code 85 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition KORTAN, JAMES F. NAME 1.2 NAME 100 PEACHTREE ST. NW STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE **ČEO** Change Addition 2.1 TITLE YOUNG, M. LAMAR NAME 2.2 NAME 100 PEACHTREE ST. NW STREET ADDRESS 2.3 STREET ADDRESS atlanta ga CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE YOUNG, M. LAMAR NAME 3.2 NAME 100 PEACHTREE ST. NW STREET ADDRESS 3.3 STREET ADDRESS **ATLANTA GA** CHTY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE HARKLEROAD, JOHN F. NAME 4. 2 NAME 100 PEACHTREE ST. NW STREET ADDRESS 4.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Addition NAME RAMSEY, THOMAS O. 5.2 NAME 100 PEACHTREE ST. NW STREET ADDRESS 5.3 STREET ADDRESS ATLANTA GA CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition TEMIYABUTR, CHATCHAI NAME 6.2 NAME 100 PEACHTREE ST. NW STREET ADDRESS 6.3 STREET ADDRESS **ATLANTA GA** CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing 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 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.