

**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 # **P39590** (5)

1. Corporation Name
RANK ORLANDO II, INC.



Principal Place of Business: **FIVE CONCOURSE PARKWAY, #2400 ATLANTA GA 30328**
Mailing Address: **FIVE CONCOURSE PARKWAY, #2400 ATLANTA GA 30328**

Attention: L. Jones

3. Date Incorporated or Qualified: **07/10/1992**
3a. Date of Last Report: **03/13/1995**
4. FEI Number: **58-2001198**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21. Suite, Apt #, etc: 22. City & State: 23. Zip: 24. Country: 25. Mailing Address: 26. Suite, Apt #, etc: 27. City & State: 28. Zip: 29. Country: 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

B1 Name: B2 Street Address (P.O. Box Number is Not Acceptable): B3: B4 City: **FL** B5 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: _____ (NOTE: Registered Agent signature required when new filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	VP
NAME	WATSON, JOHN H.	1.2 NAME	Steven Goodwin
STREET ADDRESS	FIVE CONCOURSE PKWY,2400	1.3 STREET ADDRESS	5 Concourse Pkwy #2400
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	Atlanta, GA 30328
TITLE	VD	2.1 TITLE	
NAME	NORTH, TERENCE H.	2.2 NAME	
STREET ADDRESS	6 CONNAUGHT PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LONDON, ENGLAND	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	S
NAME	FOWLER, ANN	3.2 NAME	Leslie O. Jones
STREET ADDRESS	FIVE CONCOURSE PKWY,2400-	3.3 STREET ADDRESS	5 Concourse Pkwy #2400
CITY-ST-ZIP	ATLANTA GA	3.4 CITY-ST-ZIP	Atlanta, GA 30328
TITLE	TD	4.1 TITLE	AS
NAME	DELANEY, THOMAS G.	4.2 NAME	Jack L. McNeese
STREET ADDRESS	FIVE CONCOURSE PKWY,2400	4.3 STREET ADDRESS	5 Concourse Pkwy, #2400
CITY-ST-ZIP	ATLANTA GA	4.4 CITY-ST-ZIP	Atlanta, GA 30328
TITLE	D	5.1 TITLE	VP
NAME	TURNBULL, NIGEL V.	5.2 NAME	Douglas M. Yates
STREET ADDRESS	6 CONNAUGHT PLACE	5.3 STREET ADDRESS	6 Connaught Place
CITY-ST-ZIP	LONDON, ENGLAND	5.4 CITY-ST-ZIP	London, England
TITLE	D	6.1 TITLE	
NAME	WALTON, WESLEY S	6.2 NAME	
STREET ADDRESS	77 WEST WACKER DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	6.4 CITY-ST-ZIP	

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***225.00

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, 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. But 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 changed, or on an attachment with an address.

SIGNATURE: *Leslie O. Jones* Secretary 6/19/96 770-392-6705

CR2E034 (3/96)