

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90065 007 ***158.75

DOCUMENT # P39922

1. Corporation Name

COMBINED INVESTIGATORS, INC.



Principal Place of Business

P.O. BOX 566874
ATLANTA GA 31156

Mailing Address

P.O. BOX 566874
ATLANTA GA 31156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1992

4. FEI Number

58-1655170 58-2431258

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

DICK COCKS
97 ANTON COURT
HOMOSASSA FL 34446

10. Name and Address of New Registered Agent

81 Name

Walter Lortz

82 Street Address (P.O. Box Number is Not Acceptable)

500 South Belcher Rd # 170

83

Largo,

84 City

FL

85 Zip Code

33771

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 Walter E. Lortz

1/27/99

DATE

12. OFFICERS AND DIRECTORS

TITLE CP
NAME WALSHE, TERENCE P.
STREET ADDRESS 7510 COLONY DRIVE
CITY-ST-ZIP CUMMING GA

☒ DELETE

TITLE VCS
NAME WALSHE, COLETTE P.
STREET ADDRESS 7510 COLONY DRIVE
CITY-ST-ZIP CUMMING GA

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P
Russell H. Zimmerman
407 Raven Mocker Lane
Woodstock GA 30189

☐ Change

☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

V
David Collins
729 Habersham Place
Canton GA 30115

☐ Change

☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I hereby 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/12/99

770-591-1846

CR2E034 (1/1/98)