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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	n Name	# P404 9 TROL, INC.	90	(5)					
Principal Place	of Business	<u> </u>	Ma	ailing Address					
8800 ROSWELL ROAD SUITE 130 ATLANTA GA 30350-1875 MAILINITY ACCURAGE SUITE 130 ATLANTA GA 30350-1875 ATLANTA GA 30350-1875					-				
					•.•			3. Date Incorporated or Qualified 3a. Date of Last Report 04/25/1995	
2. Principal Pla	ace of Busines	s	2a.	2a. Mailing Address				4. FEI Number Applied For	
21			26					58-1423462 Not Applicable	
Suite, Apt.	#, etc.		-	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
City & State	· · · · · · · · · · · · · · · · · · ·		271	City & State				Fee Hequired	
23			28	—¬ ´				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zıp	Country 25			Zip Coun				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	
	24 25 29 30 30 9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent	
				<u> </u>		81	Name		
BACON, JERRY C 200 S. HOOVER BLVD.					ł	82	Street Ac	Street Address (P.O. Box Number is Not Acceptable)	
							Olloon		
	BUILDING 201, SUITE 130					83			
TAMPA FL 33609					Ì	84	City	85 Zip Code	
11 Purculant t	a the provision	se of Sections 607 050	2 and 607	1500 Florido Ctatut	so the abo	<u>ا</u> ــــ		FL S 25000	
SIGNATURE _	in, and accept	the obligations of, Sec	tion 607.U	0505, Florida Statutes				rporation submits this statement for the purpose of changing its registered office board of directors. I hereby accept the appointment as registered agent. I am	
12.	Signature typed or	printed name of registered agen OFFICERS AN			TE: Registered	Agen	it signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC	OTTIOE NO 7 III	DINEO	DELETE	1.11	TLF		Change Addition	
NAME		H. BENNETT		1.2 NAM			1		
STREET ADDRESS	8800 RO		1.3 \$		HEET	ADDRESS			
CITY-ST-ZIP	ATLANTA	A GA	1.4 CITY			T-ZIP			
TITLE	VT			DELETE	2. 1 Ti	!LE		☐ Change ☐ Addition	
NAME		IAN, EDWARD J., J	R.	2.2		2.2 NAME			
STREET ADDRESS						REET	ADDRESS		
CITY-ST-ZIP TITLE	IP ATLANTA GA DELETE						T-ZIP		
NAME		, Herbert F.		M Detter	3. 1 Til 3.2 NA			☐ Change ☐ Addition	
STREET ADDRESS	4444 11444 11444 1144						ADDRESS		
CHTY-ST-ZIP	ATLANTA				3.4 CIT				
THILE				☐ DELETE	4. 1 717		. 4.11	☐ Change ☐ Addition	
NAME	,				4.2 NA	ME			
STREET ADDRESS					4.3 STF	EET	ADORESS		
City-St-ZP					4.4 CIT		7-2IP		
TITLE				DELETE	5. 1 TIT			Change Addition	
NAME CYCLE LEDDESCO					5 2 NA				
STREET ADDRESS							ADDRESS		
CITY-S1-ZIP TITLE	·		· · · · · ·	DELETE	5 4 CfT 6 1 Til		1 - ZIP	☐ Change ☐ Addition	
NAME					6.2 NA			☐ cuange ☐ Addition	
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP					6.4 CIT	Y- \$1	T-ZIP		
14. I do hereby	certify that th	e information supplied	with this f	iling is voluntarily furni	shed and c	loes	not qualify	ify 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 of on an attachment with an address.

SIGNATURE:

4/23/95 770-992-8430