

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

**FILED**

**May 20 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P93000058217 (9)**

1. Corporation Name  
**MICR, INC.**



Principal Place of Business  
**975 36TH COURT SOUTHWEST  
VERO BEACH FL 32968**

Mailing Address  
**975 36TH COURT SOUTHWEST  
VERO BEACH FL 32968-4953**

3. Date Incorporated or Qualified <b>08/19/1993</b>	3a. Date of Last Report <b>06/03/1996</b>
4. FEI Number <b>65-0431088</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent  
**LEKANIDES, THERESA R  
975 36TH COURT, SW  
VERO BEACH FL 32968**

10. Name and Address of New Registered Agent  
81 Name **MARK DRAWDY**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**975 36th CT. S.W.**  
83  
84 City **VERO BEACH** FL 85 Zip Code **32968**

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 *Mark Drawdy* (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reissuing) DATE **5-1-97**

12. OFFICERS AND DIRECTORS		DELETE
TITLE	<b>PS RODGERS, WALTER</b>	<input checked="" type="checkbox"/>
NAME	<b>880 NORTH ISLAND DRIVE</b>	
STREET ADDRESS	<b>ATLANTA GA 30327</b>	
CITY-ST-ZIP		
TITLE	<b>V LEKANDES, THERESA R</b>	<input checked="" type="checkbox"/>
NAME	<b>975 36TH COURT, SW</b>	
STREET ADDRESS	<b>VERO BEACH FL 32968</b>	
CITY-ST-ZIP		
TITLE	<b>T SHADRICK, ANDREW L</b>	<input checked="" type="checkbox"/>
NAME	<b>9865 TWINGATE DRIVE</b>	
STREET ADDRESS	<b>ALPHARETTA GA 30202</b>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		CHANGE	ADDITION
1A TITLE	<b>CEO</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1B NAME	<b>MARK DRAWDY</b>		
1B STREET ADDRESS	<b>975 36th CT. S.W.</b>		
1A CITY-ST-ZIP	<b>VERO BEACH, FL 32968</b>		
2A TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2B NAME			
2B STREET ADDRESS			
2A CITY-ST-ZIP			
3A TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3B NAME			
3B STREET ADDRESS			
3A CITY-ST-ZIP			
4A TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4B NAME			
4B STREET ADDRESS			
4A CITY-ST-ZIP			
5A TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5B NAME			
5B STREET ADDRESS			
5A CITY-ST-ZIP			
6A TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6B NAME			
6B STREET ADDRESS			
6A CITY-ST-ZIP			

14. I do 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.

SIGNATURE *Mark Drawdy* DATE **5-1-97** (97) SEC. 21112

CR2E034 (9/96)