FILE N	NOW: FILING FEE	AFTER MAY 1	IS \$225.00		
PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State DIVISION OF CORPORATIONS			
DOCUM		00059001 (6)		
 Corporation Na 		•	•		
NEONE	ATIONAL FACTOR WAR	2110002 0, 1111112			
Principal Place of	Business	M.ding Address		+ (88)(98) (14)0160 (1111 4011)	18 14 - 1 44 - 1
2960 CANTON RD HIGHWAY 5 MARIETTA GA 30066		3033 MERCY DR. ORLANDO FL 32908 US			A. Date of Last Deport
US US	30000			 Date Incorporated or Qualified 08/23/1993 	3a. Date of Last Report 05/01/1995
2. Principal Place	of Business	2a. Mailing Address		4. FEI Number 58-2067728	Applied for Not Applicable
21	oto	26 Suite, Apt #, etc.		5. Certificate of Status Desired	. \$9.75 Additional
Suite, Apt. #, (etc.	27			Fee Required
City & State		Orty & State		 Election Campaign Financing Trust Fund Contribution 	S5.00 May Be Added to Fees
23 Zip	Country	Ζφ	Country	8. This corporation has liability for Florida Statutes	or intangible tax under s. 199.032, es
24	9. Name and Address of Curre	29 nt Registered Agent	30]	10. Name and Address of New	
ORLAND	ERCY DR. DO FL 32808		83 84 City		FL 85 Zip Code
11. Pursuant to or registered familiar with	the provisions of Sections 607.050 diagent, or both, in the State of Flo and accept the obligations of, Sec	i2 and 607.1508, Florida Stat rida: Such change was autho tion 607.0505, Florida Statu	tutes, the above named co grized by the corporation's tes.	rporation submits this statement for the board of directors. Thereby accept the a	purpose of changing its registered offic ppointment as registered agent. Fam
0.01.47.105	parting typed or printed harrie of reached lage		puote segobole i Agent signiture r		DATE
12.		ND DiRECTORS	13.		OFFICERS AND DIRECTORS IN 12 Change Addition
THLE	C Doebler, Donald W	☐ DEFEIR	1 1 TITLE 12 NAME	DC	real of any and a second
STREET ADDRESS	3033 MERCY DR		1.3 STREET ADDRESS		
CiTY - S1 - ZIP	ORLANDO FL	——————————————————————————————————————	1.4 C(TY ST-Z)F	V9	Change Addition
TITLE	" P Denson, Brian H	DEFELE	2 1 TITLE 32 NAME	145	
NAME	3033 MERCY DR		2.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	ORLANDO FL		2.4 C-TY - ST - ZIP		
THILE	VST	☐ DELEIŧ	3 1 10 LE		☐ Change ☐ Addition
NAME	EDGAR, CANDICE B		3.2 NAME		
STREET ADDRESS	3033 MERCY DR		3.3 STREET ADDRESS		
CiTY - ST - ZIP	ORLANDO FL	DELETE	3.4 CHY - ST - Z'P 4.1 BILE	P	Change Addition
TITLE			4 2 NAME	Doebler, David R.	
NAME CTOSEL ADDRESS			4.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			4.4.CITY - ST - ZiO	Urlando Fr. 32800	
TITLE		☐ DELETE	5 1 TULF	VI	Change X Addition
NAME			5.2 NAME	Eaelburger Craig	٧٠
STREET ADDRESS			5.3 STREET ADDRESS	2033 Mercy Dr.	,
CITY - ST - ZIP		DELETE	6 1 THE	Orlando, F1. 32808	Change 🛣 Additio
TITLE		F" Percu	6.2 NAME	Czech Danald R.	•

NAME

STREET ADDRESS

CITY-ST-ZIP

14. If 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. 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 true 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:

RINTED N. ME OF SIGNING OFFICER OR DIRECTOR \square

5/15/94 (407) 297-0141 ext. 2240

CR2E034 (12/95)

Addition