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

PROFIT CORPORATION ANNUAL REPORT

1997



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000070779 (2)

NDC HO Principal Plac	OLDINGS COMPANY e of Business	Mailing Address 4600 MARRIOTT DRIVE		·			
SUITE 200	_	SUITE 200	•				
RELEIGH NC 2	27812	RELEIGH NC 27612-3303	J		3. Date Incorporated or Qualified	3a. Date of Las	t Report
					10/12/1993	03/07/199	
2. Principal P	lace of Business	2a. Mailing Address			4. Ft:I Number		Applied For
21		26			56-1844790		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,		5. Certificate of Status Desired	1 1 '	5 Additional
2		27			G. Certificate of clattic Desired	Fee	Required
City & State	e	City & State			6. Election Campaign Financing	\$5.0)0 May Be
3		28		-	Trust Fund Contribution		ed to Fees
Zip ⊐	Country	Zip CIII	Country		8. This corporation has liability for i		r s. 199.032,
4	9, Name and Address of Curre	29	30		Florida Statutes L 10. Name and Address of New Re-	Yes No	
			81	Name	10. Name and Address of New As-	gistered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			l l_				·,
			82	Street Addr	ress (P.O. Box Number is Not Acceptab	le)	
			83				
			84	City		FL 85 7	ip Code
SIGNATURE 12. TITLE		gent and little in applicable (NC ND DIRECTORS	13.	signature requir	oo wich reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECT	
NAME I	— — — — — — — — — — — — — — — — — — —		1.1 HILLE 1.2 NAME			L Griang	ic [] vanito
AME LEONARD, RICHARD A IREET ADDRESS 4600 MARRIOTT DRIVE, SUITE 200		1.3 STREET ADDRESS					
DITY-ST-ZIP	RALEIGH NC	IE 200	1.4 CHY-SI-				
IITLE	EVPT		2.1 Tiffet			Chang	e 🔲 Additio
NAME	KENNEDY, GLENN J		2.2 NAME				
STREET ADDRESS			2 3 STREET AL	DDRESS			
CITY-ST-ZIP			2 4 CH1Y - \$1 - 7/P				
TITLE	D		3.1 1016			Chang	e 🔲 Additio
NAME 3 MAN	MORTENSON, LEE N		3.2 NAME				
STREET ADDRESS	■ ***		3.3 STREET AF	DRESS			
CITY-ST-ZIP	CHICAGO IL		34 CITY-ST-	- ZIP			
TITLE	S		4.1 TITLE			Chang	e [_] Additio
NAME	PAYNE, CLAIR K.		4 2 NAME				
STREET ADDRESS	4600 MARRIOTT DR., STE 20	00	4.3 STREET AL	DRESS			
CITY-ST-ZIP	RALEIGH NC	ALEIGH NC		7(P			
itle		DELETE	5.1 TITLE	1		☐ Chang	e 🔲 Additio
iame .			5.2 NAME				
STREET ADDRESS			5.3 STREET AC	1	,		
CITY-ST-ZIP		Therese	5.4 CITY - ST -	ZIP			n Addres
ithe		DELETE	6.1 TOLE	1		[_] Chang	e [] Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STREET AD				
CITY+ST-ZIP			6.4 CITY - ST-	7(P			

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r), 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 logal 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.

OLONATURE.

whenil a. Teamer

PRESIDENT

2/21/97

(919) 781-5611

FILED

Apr 16 1997 8:00am

Secretary of State