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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90132 018 ***158.75

054/391

PROFIT CORPORATION ANNUAL REPORT

1999

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

DOCUMENT # P93000086488

1. Corporation Name
KHP, INC.

Principal Place of Business	Mailing Address
4431 EMBARCADERO DRIVE WEST PALM BEACH FL 33407	PO BOX 33068 RALEIGH NC 27636 US

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualifed: 12/17/1993

4. FEI Number: 59-1853333 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired XX — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes XX No

9. Name and Address of Current Registered Agent

CONRAD, JOHN R
4431 EMBARCADERO DR
PALM BCH FL 33407

10. Name and Address of New Registered Agent

81 Name: Barton J. Barham
82 Street Address (P.O. Box Number is Not Acceptable): 4431 Embarcadero Dr.
83
84 City: Palm Beach FL 85 Zip Code: 33407

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: Barton J. Barham — Barton J. Barham D/SVP — 1-28-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WRIGHT, ROBERT G		1.2 NAME		
STREET ADDRESS	3001 WESTON PKWY		1.3 STREET ADDRESS		
CITY-ST-ZIP	CARY NC		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE	D	☒ Change ☐ Addition
NAME	BARTLETT, DONALD L		2.2 NAME	Bartlett, Donald L.	
STREET ADDRESS	~~4431 EMBARCADERO DR~~		2.3 STREET ADDRESS	12700 Park Central Drive, Suite 1800	
CITY-ST-ZIP	~~PALM BEACH FL~~		2.4 CITY-ST-ZIP	Dallas, TX 75251	
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BAGBY, T. JACK III		3.2 NAME		
STREET ADDRESS	6465 COLLEGE PARK SQUARE STE 200		3.3 STREET ADDRESS		
CITY-ST-ZIP	VIRGINIA BEACH VA		3.4 CITY-ST-ZIP		
TITLE	VSTD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WILSON, MARK S.		4.2 NAME		
STREET ADDRESS	3001 WESTON PKWY		4.3 STREET ADDRESS		
CITY-ST-ZIP	CARY NC		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	BYRD, MICHAEL N	No CHANGE	5.2 NAME		
STREET ADDRESS	~~4431 EMBARCADERO DR~~		5.3 STREET ADDRESS		
CITY-ST-ZIP	~~WEST PALM BEACH FL~~		5.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	WILSHIRE, ROY L		6.2 NAME		
STREET ADDRESS	12660 COIT RD, SUITE 300		6.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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] Mark S. Wilson 1-28-99 919/677-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #