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Feb 05 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 # P93000088199 (3) 1. Corporation Name BEDMINSTER CHARLOTTE CORPORATION			
Principal Place of Business CHERRY TREE CORP. CTR. 535 RT 38, SUITE 580 CHERRY HILL NJ 08002 US		Mailing Address CHERRY TREE CORP. CTR. 535 RT 38, SUITE 580 CHERRY HILL NJ 08002-2953 US	
2. Principal Place of Business 21 145 Church St. Suite, Apt. #, etc. 22 Suite 201 City & State 23 Marietta, GA Zip Country 24 30060 25 USA		2a. Mailing Address 26 P.O. Box 2210 Suite, Apt. #, etc. 27 City & State 28 Marietta, GA Zip Country 29 30061 30 USA	
3. Date Incorporated or Qualified 12/23/1993		3a. Date of Last Report 03/27/1996	
4. FEI Number 22-3302839		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name N/A 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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 _____ DATE _____ Signature of the person who is the principal officer or director of the corporation or the registered agent or the person who is the principal officer or director of the corporation or the registered agent. (NOTE: Registered Agent's signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P NAME ASHBY, C. EDWARD JR STREET ADDRESS 535 RT 38 SUITE 580 CITY-ST-ZIP CHERRY HILL NJ 08002 ☒ DELETE	1.1 TITLE P 1.2 NAME DONALD O. KISTNER 1.3 STREET ADDRESS 145 Church St Suite 201 1.4 CITY-ST-ZIP Marietta, GA 30060 ☐ Change ☒ Addition	2.1 TITLE DC 2.2 NAME PEIPERS, DAVID H 2.3 STREET ADDRESS 535 RT 38 SUITE 580 2.4 CITY-ST-ZIP CHERRY HILL NJ 08002 ☐ DELETE	
TITLE S NAME ETTINGER, HUGH M STREET ADDRESS 535 RT 38 SUITE 580 CITY-ST-ZIP CHERRY HILL NJ 08002 ☐ DELETE	2.1 TITLE DC 2.2 NAME PEIPERS, DAVID H 2.3 STREET ADDRESS 535 RT 38 SUITE 580 2.4 CITY-ST-ZIP CHERRY HILL NJ 08002 ☐ DELETE	3.1 TITLE S 3.2 NAME ETTINGER, HUGH M 3.3 STREET ADDRESS 535 RT 38 SUITE 580 3.4 CITY-ST-ZIP CHERRY HILL NJ 08002 ☐ DELETE	
TITLE DV NAME WIDELL, NELSON E STREET ADDRESS 535 RT 38 SUITE 580 CITY-ST-ZIP CHERRY HILL NJ 08002 ☐ DELETE	4.1 TITLE DV 4.2 NAME WIDELL, NELSON E 4.3 STREET ADDRESS 535 RT 38 SUITE 580 4.4 CITY-ST-ZIP CHERRY HILL NJ 08002 ☐ DELETE	5.1 TITLE C 5.2 NAME MACIEJEWSKI, STEPHEN 5.3 STREET ADDRESS 535 RT 38 SUITE 580 5.4 CITY-ST-ZIP CHERRY HILL NJ 08002 ☒ DELETE	
TITLE C NAME MACIEJEWSKI, STEPHEN STREET ADDRESS 535 RT 38 SUITE 580 CITY-ST-ZIP CHERRY HILL NJ 08002 ☒ DELETE	6.1 TITLE C 6.2 NAME MACIEJEWSKI, STEPHEN 6.3 STREET ADDRESS 535 RT 38 SUITE 580 6.4 CITY-ST-ZIP CHERRY HILL NJ 08002 ☒ DELETE	5.1 TITLE D 5.2 NAME Henry E. Blaine 5.3 STREET ADDRESS 145 Church St Suite 201 5.4 CITY-ST-ZIP Marietta, GA 30060 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition	
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 to this report.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		1-28-97 770-422-4455 Date Daytime Phone #	

CR2E034 (9/96)