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FILED  
May 16 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 # PA6000024933  
1. Corporation Name THE ZEPHYRUS CORPORATION

Principal Place of Business Mailing Address  
105 SWEETWATER OAKS  
PEACHTREE CITY, GA. 30269

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified MARCH 20 1996		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 58-2242583		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

ROBERT C. BYRDS  
6544 MONTROSE TRAIL  
TALLAHASSEE, FLA. 32308

10. Name and Address of New Registered Agent

81 Name  
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE PRESIDENT ☐ DELETE  
11.2 NAME PHIL R JONES  
11.3 STREET ADDRESS 105 SWEETWATER OAKS  
11.4 CITY-ST-ZIP PEACHTREE CITY, GA. 30269

12.1 TITLE SECRETARY/TREASURER ☐ DELETE  
12.2 NAME JANE B JONES  
12.3 STREET ADDRESS 105 SWEETWATER OAKS  
12.4 CITY-ST-ZIP PEACHTREE CITY, GA. 30269

13.1 TITLE ☐ DELETE  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY-ST-ZIP

14.1 TITLE ☐ DELETE  
14.2 NAME  
14.3 STREET ADDRESS  
14.4 CITY-ST-ZIP

15.1 TITLE ☐ DELETE  
15.2 NAME  
15.3 STREET ADDRESS  
15.4 CITY-ST-ZIP

16.1 TITLE ☐ DELETE  
16.2 NAME  
16.3 STREET ADDRESS  
16.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition  
13.2 NAME  
13.3 STREET ADDRESS  
13.4 CITY-ST-ZIP

14.1 TITLE ☐ Change ☐ Addition  
14.2 NAME  
14.3 STREET ADDRESS  
14.4 CITY-ST-ZIP

15.1 TITLE ☐ Change ☐ Addition  
15.2 NAME  
15.3 STREET ADDRESS  
15.4 CITY-ST-ZIP

16.1 TITLE ☐ Change ☐ Addition  
16.2 NAME  
16.3 STREET ADDRESS  
16.4 CITY-ST-ZIP

17.1 TITLE ☐ Change ☐ Addition  
17.2 NAME  
17.3 STREET ADDRESS  
17.4 CITY-ST-ZIP

18.1 TITLE ☐ Change ☐ Addition  
18.2 NAME  
18.3 STREET ADDRESS  
18.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 5, 1997 770 482 6794

Date

Daytime Phone #

CR2E034 (9/96)