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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000037347 (6)

CRAWFORDVILLE ROAD ASSOCIATES, INC.

FILED Jun 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 5303 HWY 45 SOUTH 5303 HWY 45 SOUTH FT SMITH AR 72903 FT SMITH AR 72903 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1997 2a. Mailing Address 2. Principal Place of Business FEI Numbe Applied For 4231 Duval Drive 21 4831 DUVAL Drive Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred City & State \$5.00 May Be 6. Election Campaign Financing Jacksonville Beach, FL Jacksonville Beach, FL Trust Fund Contribution Added to Fees ⁷¹⁰ 3&∂50 Country 8. This corporation owes or has paid the current year Intangible Yes Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 · HALEY, WILLIAM J 10 NORTH COLUMBIA STREET 82 LÄKE CITY FL 32055 83 64 Tackson*uulu Bla*chFL 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 Horida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familia, with, and accept the obligations of, Spoton 607,0505, Florida Statutes. 15 June 1998 **SIGNATURE** (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OF FICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Director TITLE Asa G. Candler, VI 180 Allen Road, NE/Suite 202-South CREEKMORE, S.W., JII 1.2 NAME NAME **53**03 HWY-45 SOUTH 1.3 STREET ADDRESS STREET ADDRESS Atlanta, GA 30328 FT-8MITH AR 72903 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TOLE 2.1 THE eichard B. Candler NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS *322*50 Jacksonville Beach, FL CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP DELETE Change 3.1 TITLE TITLE sec./TReas. William R. Candler 180 Allen Road, NE/Suite 202-South Atlanta, CA 30328 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 41 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE 61 TITLE Change Addition TITLE 70000ES68247 6.2 NAME NAME -06/22/98--01104--02**0** STREET ADDRESS 6.3 STREET ADDRESS ***150,00 6.4 City-St-ZiP CITY-ST-ZIP

14. Thereby 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 suppliencental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that have 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 Pleet 13 or Pleet 14 or Pleet Block 12 or Block 13 if changed or on an attachmen