

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

FILED

**Feb 26 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 807906 (3)
1. Corporation Name
MARABLE-PIRKLE, INC.



Principal Place of Business 2515 FAIRBURN RD SW P O BOX 310023 ATLANTA GA 30331	Mailing Address 2515 FAIRBURN RD SW P O BOX 310023 ATLANTA GA 30331
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/23/1949	
21. Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	25. Suite, Apt. #, etc.	26. City & State
27. Zip	28. Country	29. Zip	30. Country	4. FEI Number 58-0544119	Applied For <input type="checkbox"/> Not Applicable
9. Name and Address of Current Registered Agent BEARRINGER, FARRELL 1701 WEST GARDEN STREET PENSACOLA FL 32593				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	85. Zip Code FL
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 _____ (NOTI Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD FAAS, L W 445 MONTEVALLO DR, NE ATLANTA, GA 00000	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D PIRKLE, G S 1840 LINWOOD AVE E POINT, GA 00000	1.2 NAME	
STREET ADDRESS	PD PIRKLE, R E 140 MONTICELLO WAY FAIRBURN, GA 00000	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST DUDLEY, DAN R. 130 DOVER CT. FAYETTEVILLE GA	1.4 CITY-ST-ZIP	
	V PIRKLE, MICHAEL R. 145 MONTICELLO WAY FAIRBURN GA	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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 as an attachment with an address.

SIGNATURE: *Dan R. Dudley* Secretary/Treasurer 2/26/98 404-244-4411

CP2E034 (10/97)