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FILED
May 08 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 # 818221 (4)
 1. Corporation Name
KECK & WOOD, INC.



Principal Place of Business Mailing Address
3722 PLEASANTDALE ROAD ATLANTA GA 30340 **3722 PLEASANTDALE ROAD ATLANTA GA 30340-4214**

3. Date Incorporated or Qualified **10/06/1964** 3a. Date of Last Report **04/26/1996**

21. Principal Place of Business	2a. Mailing Address	4. FEI Number 58-0801754	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Zip	29. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
25. Country	30. Country		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORBIN, P R
 731 MAY ST
 JACKSONVILLE FL 32204**

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOFFITT, MICHAEL J.	1.2 NAME	
STREET ADDRESS	3345 HIGHLAND PINE DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	DULUTH GA	1.4 CITY - ST - ZIP	
TITLE	DS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HULSEY, J R	2.2 NAME	
STREET ADDRESS	4167 ENGLISH OAK DR	2.3 STREET ADDRESS	
CITY - ST - ZIP	DORAVILLE, GA 00000	2.4 CITY - ST - ZIP	
TITLE	TVD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORBIN JR, C C	3.2 NAME	
STREET ADDRESS	3247 OLDE DEKALB WAY	3.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTA, GA 00000	3.4 CITY - ST - ZIP	
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STANLEY JR, J B	4.2 NAME	
STREET ADDRESS	135 S ROBERT DR	4.3 STREET ADDRESS	
CITY - ST - ZIP	SUGAR HILL, GA 00000	4.4 CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENZ, D D	5.2 NAME	
STREET ADDRESS	582 OLD MILL CT	5.3 STREET ADDRESS	
CITY - ST - ZIP	NORCROSS, GA 00000	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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]* 4-30-97 770/ ~~770/~~
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
JAMES HULSEY

CR2E034 (9/96)