

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92000000164
1. Corporation Name
FAISON CAPITAL DEVELOPMENT, INC.

Principal Place of Business
101 WEST TRADE STREET, SUITE 1000
CHARLOTTE NC 28202-5399

Mailing Address
121 WEST TRADE STREET, SUITE 1000
CHARLOTTE NC 28202-5399

2. Principal Place of Business

2a. Mailing Address

21 121 W TRADE STE 2550
22 CHARLOTTE NC
23 28202 USA
24

26 121 W TRADE STE 2550
27 CHARLOTTE NC
28 28202 USA
29

9. Name and Address of Current Registered Agent

JOYCE, JOHN M
225 E. ROBINSON ST.
SUITE 500
ORLANDO FL 32801

81 Name
82 Street
83
84 City

Corporation Service Company
1201 Hays Street
Tallahassee FL 32301

5 Zip Code

11. Pursuant to the provisions of Sections 607.0507 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]*

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

(NOTE: Registered Agent signature not to be written on this page)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	CULPEPPER, JAMES H IV	
STREET ADDRESS	121 WEST TRADE STREET, SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202-5399	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	SHIELDS, COY	
STREET ADDRESS	121 WEST TRADE STREET, SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202-5399	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	SKILLBECK, ANTHONY W	
STREET ADDRESS	121 WEST TRADE STREET, SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202-5399	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	STONE, R. DARY	
STREET ADDRESS	121 WEST TRADE STREET, SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC 28202-5399	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	TAKER, BILLIE B	
STREET ADDRESS	WEST TRADE STREET, SUITE 1000	
CITY-ST-ZIP	CHARLOTTE NC 28202-5399	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	SPEED, ELIZABETH M	
STREET ADDRESS	121 W TRAD ST SUITE 1900	
CITY-ST-ZIP	CHARLOTTE NC	

11 TITLE	DC
12 NAME	HENRY J FAISON
13 STREET ADDRESS	121 W TRADE STE 2550
14 CITY-ST-ZIP	CHARLOTTE NC 28202
21 TITLE	PD
22 NAME	PHILIP W NORWOOD
23 STREET ADDRESS	121 W TRADE STE 2550
24 CITY-ST-ZIP	CHARLOTTE NC 28202
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

200002859712--6
-05/03/99--01009--018
***150.00 ***150.00

VD ALLEN S JACKSON JR
121 W TRADE STE 2550
CHARLOTTE NC 28202

121 W TRADE STE 2550

AS DIANE K HUNTER
121 W TRADE STE 2550
CHARLOTTE NC 28202

FILED

APR 28 PM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: 11/09/1992
- 4. FEI Number: 56-1671960
- 5. Certificate of Status Desired: Applied For Not Applicable
- 6. Election Campaign Financing Trust Fund Contribution: \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
- 8. This corporation owes the current year intangible Personal Property Tax: Yes No

10. Name and Address of New Registered Agent

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 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, with all other like empowered

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Diane K. Hunter

4-26-99

704-472-2500

SECRETARY

001028

CR2E034 (11/98)