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Apr 28 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortimer Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P23551** (5)  
1. Corporation Name  
**ENVIRONMENTAL DESIGN INTERNATIONAL, LTD. INCORPORATED**

Principal Place of Business 150 INTERSTATE NORTH PARKWAY, SUITE 200 ATLANTA, GA 30339-2101 OFFICE: 770/956-7000 DIRECT DIAL: 770/956-7002 FAX: 770/956-7003 E-MAIL: INFO@EDILTD.COM HOME PAGE: HTTP://WWW.EDILTD.COM	Mailing Address 150 INTERSTATE NORTH PARKWAY, SUITE 200 ATLANTA, GA 30339-2101 OFFICE: 770/956-7000 DIRECT DIAL: 770/956-7002 FAX: 770/956-7003 E-MAIL: INFO@EDILTD.COM HOME PAGE: HTTP://WWW.EDILTD.COM
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22. Suite, Apt #, etc.	27. Suite, Apt #, etc.
23. City & State	28. City & State
24. Zip	29. Zip
25. Country	30. Country

3. Date Incorporated or Qualified <b>03/23/1989</b>	3a. Date of Last Report <b>04/12/1996</b>
4. FEI Number <b>58-1698642</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**BUCKLI, ANTHONY S  
% T CORPORATION SYSTEM  
8751 WEST BROWARD BOULEVARD  
PLANTATION FL 33324**

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

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

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KINSER, DONALD E.	
STREET ADDRESS	6600 POWERS FERRY RD., #200	
CITY-ST-ZIP	ATLANTA GA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	RTICHER, JAMES J.	
STREET ADDRESS	6600 POWERS FERRY RD., #200	
CITY-ST-ZIP	ATLANTA GA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BUCKLI, ANTHONY S	
STREET ADDRESS	6600 POWER FERRY RD., #200	
CITY-ST-ZIP	ATLANTA GA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" 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	

*Address Changes only!*

150 INTERSTATE NORTH PARKWAY, SUITE 200  
ATLANTA, GA 30339-2101  
OFFICE: 770/956-7000  
DIRECT DIAL: 770/956-7002  
FAX: 770/956-7003  
E-MAIL: INFO@EDILTD.COM  
HOME PAGE: HTTP://WWW.EDILTD.COM

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: *Anthony S Buckli* 4/22/97 770-956-7000  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

CR2E034 (9/96)