

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLOIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000077745 (5)

1. Corporation Name  
**FALCON CAPITAL INVESTMENTS, INC.**



Principal Place of Business: 5509 A WEST FRIENDLY AVE STE 101 GREENSBORO NC 27410 US  
Mailing Address: 5509 A WEST FRIENDLY AVE STE 101 GREENSBORO NC 27410 US

3. Date Incorporated or Qualified: 10/24/1994  
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business (21-24) and Mailing Address (26-30) fields with sub-headers for Suite, City & State, Zip, and County.

4. FEI Number: 59-1915793  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

CASS, NANCY J  
703 SWANN AVE  
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable): 324 Hyde Park Ave., Suite 375  
84 City  
FL 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:

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature typed or printed name of registered agent and the corporation. NOTE: Registered Agent signature required for recording.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D/V
NAME	MELTON, MARSHALL E	1.2 NAME	Melton, Marshall E.
STREET ADDRESS	5509 A WEST FRIENDLY AVE., STE 101	1.3 STREET ADDRESS	5509-A West Friendly Ave., Suite 101
CITY-ST-ZIP	GREENSBORO NC	1.4 CITY-ST-ZIP	Greensboro NC 27410
TITLE		2.1 TITLE	P/D
NAME		2.2 NAME	Melton, Steven G.
STREET ADDRESS		2.3 STREET ADDRESS	5509-A West Friendly Ave., Suite 101
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Greensboro NC 27410
TITLE		3.1 TITLE	S/T/D
NAME		3.2 NAME	Shertzer, Jr., Harry R.
STREET ADDRESS		3.3 STREET ADDRESS	5509-A West Friendly Ave., Suite 101
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Greensboro NC 27410
TITLE		4.1 TITLE	V/D
NAME		4.2 NAME	R. James Brower
STREET ADDRESS		4.3 STREET ADDRESS	5509-A West Friendly Ave., Suite 101
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Greensboro NC 27410
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Steven G. Melton Steven G. Melton 4/25/96 (910)855-8222  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAY/MONTH/YEAR

CR2E034 (12/95)