

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 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
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DOCUMENT # **854869** (5)
1. Corporation Name
MCDR, INC.



Principal Place of Business 5100 WHEELIS S-200 MEMPHIS TN 38117 US	Mailing Address 5100 WHEELIS S200 MEMPHIS TN 38117 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/01/1982		3a. Date of Last Report 08/06/1996	
				4. FEI Number 62-1011325		Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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 FL			
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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CEO	☒ DELETE		1.1 TITLE		☐ Change	☒ Addition
NAME	MARTIN, DAVID B.			1.2 NAME	ALBERT M. AUSTIN II		
STREET ADDRESS	5100 WHEELIS, STE. 200			1.3 STREET ADDRESS	5100 WHEELIS DR. STE 200		
CITY-ST-ZIP	MEMPHIS TN			1.4 CITY-ST-ZIP	MEMPHIS TN 38117		
TITLE	T	☐ DELETE		2.1 TITLE	RUTH DANDO	☐ Change	☒ Addition
NAME	OAKS, J. D			2.2 NAME	5100 WHEELIS DR. STE 200		
STREET ADDRESS	5100 WHEELIS, STE. 200			2.3 STREET ADDRESS	MEMPHIS TN 38117		
CITY-ST-ZIP	MEMPHIS TN			2.4 CITY-ST-ZIP			
TITLE	D	☒ DELETE		3.1 TITLE	KENNETH SMITH, SR.	☐ Change	☒ Addition
NAME	JAMES, FRED			3.2 NAME	5100 WHEELIS DR. STE 200		
STREET ADDRESS	5100 WHEELIS, STE. 200			3.3 STREET ADDRESS	MEMPHIS TN 38117		
CITY-ST-ZIP	MEMPHIS TN			3.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		4.1 TITLE	KENNETH SMITH JR.	☐ Change	☒ Addition
NAME	DANDO, DAVID C.			4.2 NAME	5100 WHEELIS DR. STE 200		
STREET ADDRESS	5100 WHEELIS, STE. 200			4.3 STREET ADDRESS	MEMPHIS TN 38117		
CITY-ST-ZIP	MEMPHIS TN			4.4 CITY-ST-ZIP			
TITLE	S	☐ DELETE		5.1 TITLE	CHARLES MOSES	☐ Change	☒ Addition
NAME	CARADINE, P. MCGEORGE			5.2 NAME	5100 WHEELIS DR. STE 200		
STREET ADDRESS	5100 WHEELIS DRIVE SUITE 200			5.3 STREET ADDRESS	MEMPHIS TN 38117		
CITY-ST-ZIP	MEMPHIS TN			5.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		6.1 TITLE	DENISON LIVAUDAIS	☐ Change	☒ Addition
NAME	WILLIAMS, JOHN			6.2 NAME	5100 WHEELIS DR. STE 200		
STREET ADDRESS	5100 WHEELIS, SUITE 200			6.3 STREET ADDRESS	MEMPHIS TN 38117		
CITY-ST-ZIP	MEMPHIS TN			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:

David B. Martin

9-2-97 901-761-0911

CR2E034 (4/97)