

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 854869

1. Entity Name

MCDR, INC. .

FILED

Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90094 046 ***158.75

Principal Place of Business

Mailing Address

5100 WHEELIS
S-200
MEMPHIS TN 38117
US

5100 WHEELIS
S200
MEMPHIS TN 38117-4554
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-1011325

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS AUSTIN, ALBERT M IV
CITY-ST-ZIP 5100 WHEELIS, STE. 200
MEMPHIS TN 38117

TITLE ☐ Change ☒ Add
NAME Controller
STREET ADDRESS Kevin Wheeler
CITY-ST-ZIP 5100 Wheelis, Suite 200
Memphis, TN 38117

TITLE ☐ Delete
NAME VPT
STREET ADDRESS OAKS, J. D
CITY-ST-ZIP 5100 WHEELIS, STE. 200
MEMPHIS TN 38117

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS SMITH, KENNETH SR
CITY-ST-ZIP 5100 WHEELIS, STE. 200
MEMPHIS TN 38117

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME P
STREET ADDRESS DANDO, DAVID C.
CITY-ST-ZIP 5100 WHEELIS, STE. 200
MEMPHIS TN 38117

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME VPS
STREET ADDRESS CARADINE, P. MCGEORGE
CITY-ST-ZIP 5100 WHEELIS DRIVE SUITE 200
MEMPHIS TN 38117

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME D
STREET ADDRESS WILLIAMS, JOHN
CITY-ST-ZIP 5100 WHEELIS, SUITE 200
MEMPHIS TN 38117

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/5/2000 761-0911