2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000609

Entity Name: TEC OF JACKSON, INC.

Current Principal Place of Business:	**New Principal Place of Business:**

700 SOUTH WEST ST.
JACKSON, MS 39201

Current Mailing Address:	**New Mailing Address:**

PO BOX 940
JACKSON, MS 39205

FEI Number: 64-0694679   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**

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

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: _____

　　　　　　　　Electronic Signature of Registered Agent　　　　　　　　　　　　　　　Date

OFFICERS AND DIRECTORS:

Title:　　　VP
Name:　　　CHELETTE, CHRISTOPHER B
Address:　　236 EAST CAPITOL STREET
City-St-Zip:　JACKSON, MS 39201

Title:　　　VP,T
Name:　　　PIRO, JOSEPH C
Address:　　236 EAST CAPITOL STREET
City-St-Zip:　JACKSON, MS 39201

Title:　　　V,D
Name:　　　HEALEA, ROBERT J
Address:　　236 EAST CAPITOL ST.
City-St-Zip:　JACKSON, MS

Title:　　　VP,D
Name:　　　GARNER, JOEY F
Address:　　236 EAST CAPITOL ST.
City-St-Zip:　JACKSON, MS

Title:　　　P,D
Name:　　　FAIL, JOSEPH D
Address:　　236 EAST CAPITOL ST.
City-St-Zip:　JACKSON, MS

Title:　　　S
Name:　　　SKELTON, DONALD W
Address:　　236 EAST CAPITOL STREET
City-St-Zip:　JACKSON, MS 39201

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DONALD W SKELTON　　　　　　　　　　　　S　　　　　　　　03/06/2012
　　　　　　Electronic Signature of Signing Officer or Director　　　　　　　　　Date