FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

changed, or on an atta

Jul 31, 2003 8:00 am Secrétary of State DOCUMENT # P01436 07-31-2003 90067 013 ***550.00 1. Entity Name TESCO PROPERTIES, INC. Principal Place of Business Mailing Address P.O. BOX 381677 2171 JUDICIAL DR. **GERMANTOWN TN 38183** SUITE 200 **GERMANTOWN TN 38138** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 62-1073407 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rejustating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CE₀ TITLE TITI F ☐ Addition ☐ Delete Change NAME SISSON, PETE NAME STREET ADDRESS 2171 JUDICIAL DR. STREET ADDRESS CITY-ST-ZIP **GERMANTOWN TN 38138** CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE ☐ Addition SISSON, JERRY NAME NAME STREET ADDRESS 2171 JUDICIAL DRIVE STREET ADDRESS CITY-ST-ZIP **GERMANTOWN TN 38138** CITY-ST-7IP TITLE Delete TITLE ☐ Addition DEES, PHILIP C NAME NAME STREET ADDRESS 2171 JUDICIAL DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P **GERMANTOWN FL 38138** Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 10 or Block 11 if

Daytime Phone #