

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20249

FILED
Apr 17, 2009
Secretary of State

Entity Name: UNITED ARTISTS PROPERTIES I CORP.

Current Principal Place of Business:

7132 REGAL LANE
KNOXVILLE, TN 37918

New Principal Place of Business:

Current Mailing Address:

7132 REGAL LANE
KNOXVILLE, TN 37918

New Mailing Address:

FEI Number: 84-1093560 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAMPBELL, MICHAEL L
Address: 7132 REGAL LANE
City-St-Zip: KNOXVILLE, TN 37918

Title: VD () Delete
Name: DUNN, GREGORY W
Address: 7132 REGAL LANE
City-St-Zip: KNOXVILLE, TN 37918

Title: VT () Delete
Name: MILES, AMY E
Address: 7132 REGAL LANE
City-St-Zip: KNOXVILLE, TN 37918

Title: VS () Delete
Name: BRANDOW, PETER B
Address: 7132 REGAL LANE
City-St-Zip: KNOXVILLE, TN 37918

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: COGGIN, COREY
Address: 7132 REGAL LANE
City-St-Zip: KNOXVILLE, TN 37918 US

Title: VPAS () Change (X) Addition
Name: CRANE, ROBERT G
Address: 7132 REGAL LANE
City-St-Zip: KNOXVILLE, TN 37918 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: COREY COGGIN

V

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date