FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200009875 (5)

THE AVENUES, INC.

Principal Place of Business

Mailing Address

6148 LEE HIGHWAY SUITE 300/ONE PARK PLACE CHATTANOOGA TN 37421-2831

6148 LEE HIGHWAY SUITE 300/ONE PARK PLACE CHATTANOOGA TN 37421-2931

FILED
May 05 1998 8:00am
Secretary of State



CHALLINIOCON IN 9/451/5991				OHNTINIOOON THE BITELESSE				DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified 12/07/1992		
2. P	rincipal Pla	ace of Busin	ness	2a. Mailing Address				4. FEI Number Applied For		
21				26				62-1516081 Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.	¬ ''			5. Certificate of Status Desired S8.75 Additional Fee Required		
	City & State	,		City & State	•			6. Election Campaign Financing \$5.00 May Be		
23			<u> </u>	28				Trust Fund Contribution Added to Fees		
	Zip		Country	Z(p		Country	<i>f</i>	8. This corporation owes or has paid the current year Intangible		
24	<u> 37421-</u>		25	29 37421-6511	30			Personal Property Tax due June 30. X Yes No		
			and Address of Curre	int Registered Agent	-	B1	T 11	10. Name and Address of New Registered Agent		
C CONFORMION SISIEM							B1 Name			
1200 SOUTH PINE ISLAND ROAD							82 Street Address (P.O. Box Number is Not Acceptable)			
	PLANTATION FL 33324									
						83				
						84	City	ity FL 85 Zip Code		
44	Dureuant t	o the provis	sions of Sections 607.05	02 and 607 1508 Florida St	latules the	abov	e-name	amed corporation submits this statement for the purpose of changing its registered		
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.										
	agent. I ar	n fa miliar w	ith, and accept the obli	gations of, Section 607.0505	5, Florida S	statute	S.			
SIG	NATURE .				AION Devis			gnature required when reinstating) DATE		
10		Signature, typec	or printed name of registered as OFFICERS At	ND DIRECTORS		3.	ent signal	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	1	EVP	CATIOLITO	X DELETE		.1 TITLE		VP ☐ Change X Addition		
			RD, JAMES L.	QQ DECENT		2 NAME		GIMPLE, RONALD S.		
NAME				300/ONE PARK PLACE			T ADDRES	CALC TO THE CHICAGO CONTRACT TO A CO.		
	ET ADDRESS		ANOOGA TN 37421-2					01140004100004 (DN 07/04 (E14		
	-\$T-ZIP	SVP		DELETE		.4 City-5 .1 Title	31 - 21	X Change Addition		
TITLE		-	ESS, BEN S.		I -	2 NAME		The state of the s		
NAMI				300/ONE PARK PLACE	1		I ADDRES	DECC.		
	et address		ANOOGA TN 37421-2		9			OTTOTAL NO. O. A. C. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	-ST-ZIP	-VP	110001 111 017212	DELETE		4 CITY- 1 TITLE	SI-ZP	P CHAITANOUGA IN 37421-0311 X Change ☐ Addition		
TITLE			R, ERIC P.	בַ יענינינ	I -	2 NAME		Eg olding		
NAMI				300/ONE PARK PLACE	P 1					
STRE	ET ADDRESS						T ADDRES	l		
-	-ST-ZIP	VP	ANOOGA TN 37421-2			4. CITY-	ST-ZIP	P CHATTANOOGA TN 37421-6511		
TITLE			TTE, KENNY F.	DELETE		.1 TITLE		TÃ Origings CI Admino		
NAM	_			300/ONE PARK PLACE		. 2 NAME				
STRE	ET ADDRESS						T ADDRES	l .		
	-\$1-ZIP		ANOOGA TN 37421-2			4 CITY-	ST-ZIP			
TITLE		VP	A DOMBIE I	DELETE		.1 TITLE		∑ Change		
NAM	E		A, RONNIE L.	ANNUALE DAME DI ACE	5	.2 NAME				
STRE	ET ADDRESS			300/ONE PARK PLACE	5	3 STREE	1 ADDRES			
CITY	-ST-ZIP		ANOOGA TN 37421-1			4 CITY-	ST-ZIP			
TITLE	:	VP		☐ DELETE	6	1 TITLE		Change Additio		
NAM	E		AS, GUS	****	6	2 NAME				
STRE	ET ADDRESS			300/ONE PARK PLACE	6	.3 STREE	t addres			
CITY	-ST-ZIP		ANOOGA TN 37421-2			4 CITY-	ST-ZIP	CHATTANOOGA TN 37421-6511		
14.	indicated	on this ann	ual report or supplemen	ital annual report is true and	d accorrate	and th	nat mv.	n stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ny signature shall have the same legal effect as if made under oath; that I am an ort as required by Chapter 607, Florida Statutes; and that my name appears in		
	Block 12	or B lock 13	if changed, or on an atl	lachment with an address.	1		.oport	are an independent and it is a second properties and individual abbasis at		

4/23/98 (423) 855-0001