

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832152

Entity Name: PHILLIPS AND JORDAN, INCORPORATED

Current Principal Place of Business:

10201 PARKSIDE DRIVE
SUITE 300
KNOXVILLE, TN 37922

Current Mailing Address:

PO BOX 52050
KNOXVILLE, TN 37950 US

FEI Number: 56-0694573

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Officer/Director Detail :

Title DIRECTOR, CHAIRMAN
Name PHILLIPS, AVIS A.
Address 8940 GALL BLVD
City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR, VC, CEO
Name PHILLIPS, JR., WILLIAM T.
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title DIRECTOR, PRESIDENT
Name MCMULLEN, J. PATRICK
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP
Name ORR, DUDLEY
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title DIRECTOR
Name WHITSON, LESA P.
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP
Name RILEY, RUSSELL PAGE
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP
Name HEDRICK, ERIC
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title SVP
Name PIERCE, MORGAN
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

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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: JOHN D. LAWRENCE

SECRETARY

04/28/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name EDDINGS, CHRISTINA M.
Address 8940 GALL BLVD
City-State-Zip: ZEPHYRHILLS FL 33541

Title VP
Name PHELPS, ART
Address 8940 GALL BLVD
City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR
Name SHULER, JR., CALVIN LAMAR
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP
Name BUCHANAN, KYLE
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title DIRECTOR
Name ROSE, JAMES F.
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP, TREASURER, SECRETARY
Name LAWRENCE, JOHN D.
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title SVP
Name ARVIDSON, GERRY
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP
Name STRADER, RANDALL E.
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title VP
Name WILLIAMS, PAT
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922

Title ASSISTANT SECRETARY
Name HOCKMAN, CHRISTOPHER B.
Address 10201 PARKSIDE DRIVE
SUITE 300
City-State-Zip: KNOXVILLE TN 37922