

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000609

Entity Name: TEC OF JACKSON, INC.

Current Principal Place of Business:

700 SOUTH WEST ST.
JACKSON, MS 39201

FILED
Mar 01, 2017
Secretary of State
CC0034629401

Current Mailing Address:

PO BOX 940
JACKSON, MS 39205

FEI Number: 64-0694679

Certificate of Status Desired: Yes

Name and Address of Current 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

Officer/Director Detail :

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

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

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

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

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

Title VP
Name GARNER, JAMES W
Address 236 EAST CAPITOL STREET
City-State-Zip: JACKSON MS 39201

Title VICE PRESIDENT AND DIRECTOR
Name CALLISON, BRANDI F
Address 236 EAST CAPITOL STREET
City-State-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

SECRETARY

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date