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208-75
each

DOCUMENT # 219470 (2)

DECLASSIFICATION AUTHORITY:

Mailing Address
11200 NINTH ST N #100
ST PETERSBURG FL 33716

3. Date Incorporated or Qualified 02/28/1959	3a. Date of Last Report 03/02/1995		
4. FDI Number 59-0856928	<table border="1"> <tr> <td>Applied For</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>	Applied For	Not Applicable
Applied For			
Not Applicable			
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			

2	Principal Place of Business		2a	Mailing Address	
1			26		
	Suite, Apt. #, etc.			Suite, Apt. #, etc.	
2			27		
	City & State			City & State	
3			28		
	Zip	Country		Zip	Country
4	25		29	30	

9. Name and Address of Current Registered Agent

WHEATCRAFT, LYND
11200 NINTH ST. NO.
ST PETERSBURG FL 33716

10. Name and Address of New Registered Agent

_____ (P.O. Box Number is Not Acceptable)

_____ FL 85 Zip Code _____

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

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[16]

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	☒ DELETE
NAME	EDDY, SCOTT	
STREET ADDRESS	11200 NINTH ST NO.	
CITY - ST - ZIP	ST. PETERSBURG FL 33716	
TITLE	ST	☐ DELETE
NAME	WHEATCRAFT, LYNDA M	
STREET ADDRESS	11200 NINTH ST N, #100	
CITY - ST - ZIP	ST PETERSBURG FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	President Chairman of Board ☐ Change ☒ Addition
1.2 NAME	Frank T. Foster
1.3 STREET ADDRESS	180 West End Ave / 6 th Floor
1.4 CITY - ST - ZIP	Nashville, TN 37203 37203
2.1 TITLE	Director ☐ Change ☒ Addition
2.2 NAME	Sudy Foster
2.3 STREET ADDRESS	180 West End Ave / 6 th Floor
2.4 CITY - ST - ZIP	Nashville, TN 37203
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 12 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lynda M. Wheatcraft 3/27/96

813-576-7055

CR2E034 (12/95)