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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 510048 1. Corporation Name

HUGH O. PRICE, INC.

FILED Jul 29, 1999 8:00 am Secretary of State

07-29-1999 90027 020 ***550.00

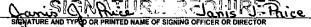


Principal Place of Business	Mailing Address	_			tt millit miðit minst mintt galet inni
1857 HWY 113 PO BOX 5 WHITESBURG TN 37891	1857 HWY 113 PO BOX 5 WHITESBURG TN 37891			DO NOT WRITE IN TH	IIS SPACE
U\$	US			3. Date Incorporated or Qualifed 08/02/1976	
Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-1417306	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			6- Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25 .	Zip 29	Country 30		This corporation owes the current year Personal Property Tax.	Ŭ Yes □ No
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
PATE, DONALD B.		81		Street Address (P.O. Box Number is Not Acceptable)	
207 E. ROBERTSON ST. STE. E BRANDON FL 33511		83			
		84	City	F	L 85 Zip Code
 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation. 	of Florida. Such change was	authorized by	the corporation	ration submits this statement for the purpose is board of directors. I hereby accept the appropriate the purpose is a second of directors.	of changing its registered pointment as registered
SIGNATURE					

DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition ☐ Change mue PD □ DELETE 1,1 TITLE NAME PRICE, HUGH O 1.2 NAME 1857 HWY 113 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WHITESBURG TN 1.4 CITY-ST-ZIP ☐ DELETE Addition ☐ Change TITLE **VDS** 2.1 TITLE NAME PRICE, JANIS J 2.2 NAME 1857 HWY 113 2.3 STREET ADDRESS STREET ADDRESS WHITESBURG TN CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY+ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-SY-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



423-235-4406

CR2E034 (11/98