

DOCUMENT # 818021

CUMMINGS INCORPORATED, THE INTERNATIONAL SIGN SE

CUMMINGS INC.
200 12TH AVENUE SOUTH
NASHVILLE TN 37203

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NASHVILLE TN 37203

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Applied For
Not Applicable

☐ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Zip Code

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

\$5.00 May Be
Added to Fees

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-2001
Date

(615) 244-5555

Daytime Phone # Ext 289

0565569

CR2E034 (10/00)