

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832851

FILED
Jan 21, 2005
Secretary of State

Entity Name: I.C. THOMASSON & ASSOCIATES, INC.

Current Principal Place of Business:

2950KRAFT DR
STE 500
NASHVILLE, TN 37204

New Principal Place of Business:

2950 KRAFT DR
STE 500
NASHVILLE, TN 37204

Current Mailing Address:

2950KRAFT DR
STE 500
NASHVILLE, TN 37204

New Mailing Address:

2950 KRAFT DR
STE 500
NASHVILLE, TN 37204

FEI Number: 62-0721262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CSC
1221 HAYS STREET
TALLAHASSEE, FL 32314 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: BRATTON, GEORGE R JR,
Address: 9224 FOX RUN DR.
City-St-Zip: BRENTWOOD, TN

Title: V () Delete
Name: HARVILLE, J. CLIFF,
Address: 6906 PULL TIGHT HILL RD.
City-St-Zip: COLLEGE GROVE, TN 37046

Title: T () Delete
Name: TINNELL, WILLIAM T.
Address: 1657 RACHEL WAY
City-St-Zip: OLD HICKORY, TN 37138

Title: P () Delete
Name: WIMBERLY, J. J. IV,
Address: 1100 RADNOR GLEN
City-St-Zip: BRENTWOOD, TN 37027

Title: S () Delete
Name: GREEN, ALBERT E.
Address: 10675 INDEPENDENT HILL RD.
City-St-Zip: ARRINGTON, TN 37014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM T. TINNELL

TREA

01/21/2005

Electronic Signature of Signing Officer or Director

Date