

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836377

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: HUDSON COMPANY OF TENNESSEE

## Current Principal Place of Business:

17347 AL. HWY. 75  
HENAGAR, AL 35978

## New Principal Place of Business:

## Current Mailing Address:

17347 AL. HWY. 75  
HENAGAR, AL 35978

## New Mailing Address:

P.O. BOX 429  
HENAGAR, AL 35978

FEI Number: 62-0856435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: WILKS, WINSTON,  
Address: 765 LIBERTY RD  
City-St-Zip: HENAGAR, AL 35978

Title: D ( ) Delete  
Name: STARLING, DAVID H  
Address: RT #4  
City-St-Zip: HENAGAR, AL 35978

Title: D ( ) Delete  
Name: WILKS, JR., WINSTON A TRES.  
Address: 3485 ALABAMA HIGHWAY 40  
City-St-Zip: HENAGAR, AL 35978

Title: PD ( ) Delete  
Name: WILKS, WINSTON A., S, R.  
Address: 348 BIDDLE LANE  
City-St-Zip: HENAGAR, AL 35978

Title: D ( ) Delete  
Name: WILKS, KEVIN  
Address: 619 LIBERTY RD  
City-St-Zip: HENAGAR, AL 35978

## 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 exemption stated in Chapter 119, 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: WINSTON A. WILKS, SR.

PD

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date