

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90029 039 ***150.00

DOCUMENT # 841895

1. Entity Name
FLORENCE & HUTCHESON, INC.



Principal Place of Business

**P.O. BOX 7267
2550 IRVIN COBB DR.
PADUCAH, KY 42002-7267**

Mailing Address

**P.O. BOX 7267
2550 IRVIN COBB DR.
PADUCAH, KY 42002-7267**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01252008

Chg-P

CR2E034 (12/06)

4. FEI Number

61-0648608

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GLUNT, ROSS
1800 ROPER ROAD
SAINT CLOUD, FL 34771**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **COLBURN, ROGER L**
CITY-ST-ZIP **2550 IRVIN COBB DR
PADUCAH, KY 42003**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **EVP**
STREET ADDRESS **SCOTT, HARRIS**
CITY-ST-ZIP **1321 MURFREESBORO ROAD SUITE 325
NASHVILLE, TN 37217**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **BODS**
STREET ADDRESS **GLUNT, BEN G**
CITY-ST-ZIP **971 ROGERS BRIDGE ROAD
DUNCAN, SC 29334**

TITLE ☒ Change ☐ Addition
NAME **BODS**
STREET ADDRESS **Glunt, Ben**
CITY-ST-ZIP **16 Wellington Avenue
Greenville, SC 29609**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **SANDERS, SUZANNE**
CITY-ST-ZIP **2550 IRVIN COBB DRIVE
PADUCAH, KY**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **CEO**
STREET ADDRESS **ECHOLS, JR ROBERT L**
CITY-ST-ZIP **501 HUGER STREET
COLUMBIA, SC 29201**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **THACHER DAN**
CITY-ST-ZIP **2550 IRVIN COBB DR
PADUCAH, KY 42003**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Suzanne Sanders

Suzanne Sanders
Treasurer/CFO

1-28-08 270/444-9691