

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **847761** (4)
1. Corporation Name
HORACE SMALL MANUFACTURING COMPANY



Principal Place of Business

**350 28TH AVE. N.
NASHVILLE TN 37209
US**

Mailing Address

**P.O. BOX 1269
NASHVILLE TN 37202
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/22/1980

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number
62-0536125

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **KEITH, J. COLIN**
STREET ADDRESS **350 28TH AVE N**
CITY-ST-ZIP **NASHVILLE TN 37209**

TITLE **VPCS** ☐ DELETE
NAME **VACEK, RICHARD B JR**
STREET ADDRESS **350 28TH AVE N**
CITY-ST-ZIP **NASHVILLE TN**

TITLE **PCDO** ☐ DELETE
NAME **GATES, ROBERT W JR**
STREET ADDRESS **350 28TH AVE. N.**
CITY-ST-ZIP **NASHVILLE TN**

TITLE **VPT** ☐ DELETE
NAME **SMITH, RANDELL E**
STREET ADDRESS **350 N 28 AVE**
CITY-ST-ZIP **NASHVILLE TN**

TITLE **D** ☐ DELETE
NAME **MILLS, CHRISTOPHER H**
STREET ADDRESS **350 28TH AVE N**
CITY-ST-ZIP **NASHVILLE TN 37209**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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.

SIGNATURE:

Randall E. Smith

5/28/98 (615)320-1000

CR2E034 (10/97)