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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 855505

1. Corporation Name

Jacques-Miller, Inc.

Principal Place of Business

Mailing Address

102 Woodmont Blvd.,
Suite 400
Nashville, TN 37205

102 Woodmont Blvd.,
Suite 400
Nashville, TN 37205

3. Date Incorporated or Qualified
February 10, 1983

3a. Date of Last Report
August 3, 1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. # etc 102 Woodmont
22 Blvd., Suite 400

26 Suite, Apt. #, etc 102 Woodmont
27 Blvd., Suite 400

4. FEI Number
62-1071660

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

23 Nashville, TN

28 Nashville, TN

24 Zip 37205

25 Country USA

29 Zip 37205

30 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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 of officer or printed name of registered agent and the corporation (if applicable) (If the registered agent is a corporation, the signature of the president or other officer authorized to execute this report is required.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME C. David Griffin
STREET ADDRESS 102 Woodmont Blvd. Ste 400
CITY-ST-ZIP Nashville TN 37205

TITLE S
NAME James T. Gunn
STREET ADDRESS 2002 Richard Jones Rd., Ste 203
CITY-ST-ZIP Nashville TN 37215

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

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Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. David Griffin, President

5/2/96

(615) 292-7273

CR2E034 (12/95)