2002 Uniform Business Report (UBR)

Apr 01, 2002 8:00 am Secretary of State F00000004839 DOCUMENT # 1. Entity Name POWELL BUILDING GROUP, INC. 04-01-2002 90648 043 ***150 00 Principal Place of Business Mailing Address 300 OLDHAM STREET 300 OLDHAM STREET NASHVILLE TN 37213 NASHVILLE TN 37213 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1772623 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS (9/01) ☐ Change ☐ Addition TITLE ☐ Delete TITLE FINCH, JOHN D NAME NAME STREET ADDRESS STREET ADDRESS 300 OLDHAM STREET CITY-ST-ZIP CITY-ST-7IP NASHVILLE TN 37213 Change Addition TITLE ☐ Delete TITLE NAME NAME PROW. TIMOTHY A STREET ADDRESS STREET ADDRESS 300 OLDHAM STREET CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN 37213 Delete K Change ☐ Addition TITLE TITLE Prow, Timothy A. NAME NAME CLAYTON, GARY 300 Oldham Street STREET ADDRESS STREET ADDRESS 3622 BRISTOL HIGHWAY CITY-ST-ZIF CITY-ST-ZIP Nashville, TN 37213 JOHNSON CITY TN 37601 TITLE Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 or supplemental report's 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 are ceiver or trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. Thereby certify that the indicated on this report

ECOnn DE Finch, Pres.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

of the corporation or changed, or on an a

SIGNATURE: