

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005045

FILED  
Apr 17, 2012  
Secretary of State

**Entity Name:** RHODES COLLEGE (TENNESSEE), INC.

**Current Principal Place of Business:**

2000 NORTH PARKWAY  
MEMPHIS, TN 38112

**New Principal Place of Business:**

**Current Mailing Address:**

2000 NORTH PARKWAY  
MEMPHIS, TN 38112

**New Mailing Address:**

**FEI Number:** 62-0476301

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TROUTT, WILLIAM E  
Address: 91 MORNINGSIDE PARK  
City-St-Zip: MEMPHIS, TN 38104

Title: V  
Name: DROMPP, MICHAEL  
Address: 10563 JARED MICHAEL LANE  
City-St-Zip: CORDOVA, TN 38016

Title: S  
Name: HOKANSON RICHEY, MEL  
Address: 215 LEMASTER STREET  
City-St-Zip: MEMPHIS, TN 38104

Title: T  
Name: BOONE, J. ALLEN JR.  
Address: 1889 VINTON  
City-St-Zip: MEMPHIS, TN 38104

Title: D  
Name: EVANS, WILLIAM E  
Address: 481 TENNESSEE ST.  
City-St-Zip: MEMPHIS, TN 38103

Title: D  
Name: MICHALCHECK, WILLIAM  
Address: 620 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10021

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: J. ALLEN BOONE

T

04/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date