2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 18, 2006 8:00 am Secretary of State DOCUMENT # F04000006786 1. Entity Name 04-18-2006 90082 039 ***150.00 RT TAMPA, INC. Principal Place of Business Mailing Address 150 WEST CHURCH AVENUE MARYVILLE TN 37801 150 WEST CHURCH AVENUE MARYVILLE TN 37801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State City & State 4. FEI Number 72-1380574 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 \$5.00 May Be Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE PC. Delete TITLE ☐ Change ☐ Addition BEALL, S.E. III NAME NAME STREET ADDRESS STREET ADDRESS 150 WEST CHURCH AVENUE CITY-ST-ZIP MARYVILLE TN 37801 CITY-ST-ZIP DΛ Delete ☐ Change ☐ Addition DUFFY, MARGUERITE N NAME NAME STREET ADDRESS 150 WEST CHURCH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARYVILLE TN 37801 ☐ Delete TITLE ☐ Change ☐ Addition TITLE VSD NAME NAME MAY, SCARLETT STREET ADDRESS STREET ADDRESS 150 WEST CHURCH AVENUE CITY-ST-ZIP CITY-ST-ZIP MARYVILLE TN 37801 v P& CONtroller VP & CONTroller ☐ Detete ☐ Change 4 Addition TITLE Franklin E. Southall, Jr Franklin E Southall, Jr. NAME NAME 150 West Church AVENUE 150 west Church Avenue STREET ADDRESS STREET ADDRESS maryvilles To 37801 CITY-ST-7IP manyville, To 37801 CITY-ST-7IP ☐ Delete Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Frank Southall. To VPO Controller 4-7-06 865-970-5700 Date Daysing Phone #

FILED