


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000006786	
1. Entity Name RT TAMPA, INC.	

Principal Place of Business 150 WEST CHURCH AVENUE MARYVILLE, TN 37801	Mailing Address 150 WEST CHURCH AVENUE MARYVILLE, TN 37801
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DO NOT WRITE IN THIS SPACE



01162007 No Chg-P CR2E034 (11/05)

4. FEI Number 72-1380574	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC BEALL, S.E. III 150 WEST CHURCH AVENUE MARYVILLE, TN 37801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DUFFY, MARGUERITE N 150 WEST CHURCH AVENUE MARYVILLE, TN 37801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MAY, SCARLETT 150 WEST CHURCH AVENUE MARYVILLE, TN 37801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPC SOUTHALL, FRANKLIN E JR 150 W CHURCH AVE MARYVILLE, TN 37801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/18/07-80033-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Finl Jotsh 4/27/07 865-379-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #