

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-05-2007 90142 041 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F05000004072		
1. Entity Name ROCKLYN-THOMAS, INC.		
Principal Place of Business 2620 OLD LEBANON ROAD NASHVILLE, TN 37214		Mailing Address 2620 OLD LEBANON ROAD NASHVILLE, TN 37214
DO NOT WRITE IN THIS SPACE		
		03052007 No Chg-P CR2E034 (11/05)
4. FEI Number 33-1005362		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent JINKS, RICHARD L 207 HUDSON CIRCLE NICEVILLE, FL 32578		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: <u>Richard L. Jinks</u> 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 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	P SIZEMORE, WILLIAM R 2620 OLD LEBANON ROAD NASHVILLE, TN 37214	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CAMPBELL, DANNY T 85 E. HILL STREET MT. JULIET, TN 37122	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u>William R. Sizemore</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>04/16/07</u> <u>65-872-9505</u>