

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000004944

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** ACCEPTANCE INSURANCE AGENCY OF TENNESSEE, INC.

**Current Principal Place of Business:**

3322 WEST END AVE - 10TH FLOOR  
NASHVILLE, TN 37203

**New Principal Place of Business:**

3813 GREEN HILLS VILLAGE DRIVE  
NASHVILLE, TN 37215

**Current Mailing Address:**

3322 W END AVE - 10TH FLOOR  
NASHVILLE, TN 37203

**New Mailing Address:**

P O BOX 23410  
NASHVILLE, TN 37202

**FEI Number:** 62-1552707

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: HARRISON, STEVE  
Address: 3813 GREEN HILLS VILLAGE DRIVE  
City-St-Zip: NASHVILLE, TN 37215

Title: SD  
Name: BODAYLE, MICHAEL  
Address: 3813 GREEN HILLS VILLAGE DRIVE  
City-St-Zip: NASHVILLE, TN 37215

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

SIGNATURE: MICHAEL BODAYLE

SECR

03/31/2010

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

\_\_\_\_\_  
Date