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ANNUAL REPORT
1995

APPROVED
AND
FILED

95 FEB 23 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F92000000013 (4)

1. Current Name
ANDERSON-TULLY COMPANY

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
1242 N. 2ND ST. MEMPHIS TN 38107 US	1242 N. 2ND ST. MEMPHIS TN 38107 US

3. Date Incorporated or Qualified: 10/27/1992	3a. Date of Last Report: 02/24/1994
2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)
4. FEI Number: 62-0115690	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (If changing Registered Agent, Registered Agent must sign) (If not changing Registered Agent, signature required when mailing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	PD	1.1 TITLE	☐ Change ☐ Addition
Name	LEWIS, PARNELL S. J	1.2 NAME	
Street Address	212 E. CHICHASAW PKWY.	1.3 STREET ADDRESS	
City-St-Zip	MEMPHIS TN	1.4 CITY-ST-ZIP	
Title	VSD	2.1 TITLE	☐ Change ☐ Addition
Name	TULLY, BART C. J	2.2 NAME	
Street Address	2218 KIRBY RD.	2.3 STREET ADDRESS	
City-St-Zip	MEMPHIS TN	2.4 CITY-ST-ZIP	
Title	VTD	3.1 TITLE	☐ Change ☐ Addition
Name	COOMBS, E D	3.2 NAME	
Street Address	1118 BILLY BRYANT	3.3 STREET ADDRESS	
City-St-Zip	COLLIERVILLE TN 38017	3.4 CITY-ST-ZIP	
Title	VD	4.1 TITLE	☐ Change ☐ Addition
Name	HALL, CLAUDE T	4.2 NAME	
Street Address	920 WARRENTON RD.	4.3 STREET ADDRESS	
City-St-Zip	VICKSBURG MS	4.4 CITY-ST-ZIP	
Title	V	5.1 TITLE	☐ Change ☐ Addition
Name	NESMITH, BRUCE W	5.2 NAME	
Street Address	727 FT. HILL DR.	5.3 STREET ADDRESS	
City-St-Zip	VICKSBURG MS	5.4 CITY-ST-ZIP	
Title	V	6.1 TITLE	☐ Change ☐ Addition
Name	SCHAFFHAUSER, JOHN O	6.2 NAME	
Street Address	82 WALNUT BEND	6.3 STREET ADDRESS	
City-St-Zip	CORDOVA TN 38018	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this report is correctly furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 with an arrow or on an attachment with an arrow.

SIGNATURE: [signature] E. DAVID COOMBS VP/TREASURER 2-23-95 901-576-1400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0470074*** FP