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FILED
May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92000000291 (6)

1. Corporation Name

BOHANNON BREWING COMPANY

Principal Place of Business

134 SECOND AVE. NORTH
NASHVILLE TN 37201

Mailing Address

134 SECOND AVE. NORTH
NASHVILLE TN 37201-1902



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

HARRIS, JOHN B
401 SAN JUAN DR.
PONTE VEDRA BEACH FL 33082

3. Date Incorporated or Qualified

11/18/1992

3a. Date of Last Report

05/30/1996

4. FEI Number

62-1354720

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CELLA, JOHN G
STREET ADDRESS 28 THORNDALL
CITY-ST-ZIP ST. LOUIS MO 63117 ☒ DELETE

TITLE D
NAME CELLA, LOUIS A
STREET ADDRESS #9 BERKLEY LANE
CITY-ST-ZIP ST. LOUIS MO 63124 ☒ DELETE

TITLE P
NAME BOHANNON, P. LINDSAY
STREET ADDRESS 201 CLARENDON AVE.
CITY-ST-ZIP NASHVILLE TN 37205 ☐ DELETE

TITLE VP
NAME BOHANNON, J. E. JR
STREET ADDRESS 1342 EDGEWOOD DR.
CITY-ST-ZIP BOWLING GREEN KY 42101 ☐ DELETE

TITLE S
NAME MATHEWS, ROBERT C. H. JR
STREET ADDRESS 405 BELLE MEADE BLVD.
CITY-ST-ZIP NASHVILLE TN 37205 ☐ DELETE

TITLE C
NAME MCWHORTER, R. CLAYTON
STREET ADDRESS 400 HYDE PK
CITY-ST-ZIP NASHVILLE TN 37215 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME George M Garrett
1.3 STREET ADDRESS 420 Elmington Avenue
1.4 CITY-ST-ZIP Nashville TN 37205 ☐ Change ☒ Addition

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Arthur C. Best
2.3 STREET ADDRESS 628 Westview Avenue
2.4 CITY-ST-ZIP Nashville TN 37205 ☐ Change ☒ Addition

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME William A Williamson III
3.3 STREET ADDRESS 423 Sunnyside Drive
3.4 CITY-ST-ZIP Nashville TN 37205 ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address.

SIGNATURE:

P Lindsay Bohannon

P Lindsay Bohannon 4/28/97 615 242 8223

CR2E034 (9/96)