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May 16 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 # F93000004382 (8)

1. Corporation Name  
TPI TRANSPORTATION, INC.



Principal Place of Business

3950 RCA BLVD  
SUITE 5001  
PALM BEACH GARDENS FL 33410  
US

Mailing Address

3950 RCA BLVD  
SUITE 5001  
PALM BEACH GARDENS FL 33410-4227  
US

3. Date Incorporated or Qualified  
09/28/1993

3a. Date of Last Report  
02/29/1996

2. Principal Place of Business

21 1727 Elm Hill Pike  
Suite, Apt. #, etc.

22 City & State  
NASHVILLE TN

23 Zip Country  
37210

2a. Mailing Address

26 1727 Elm Hill Pike  
Suite, Apt. #, etc.

27 ATN Tax Dept  
City & State

28 NASHVILLE TN  
Zip Country  
37210

4. FEI Number

62-1540856

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
TALLAHASSEE FL 32301

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME SHARP, J. GARY  
STREET ADDRESS 3950 RCA BLVD, SUITE 5001  
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE VD  
NAME LONG, HANEY A  
STREET ADDRESS 3950 RCA BLVD, SUITE 5001  
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE VTD  
NAME BURFORD, FREDERICK W  
STREET ADDRESS 3950 RCA BLVD, SUITE 5001  
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE S  
NAME KENNEDY, ROBERT A.  
STREET ADDRESS 3950 RCA BLVD, SUITE 5001  
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  
1.2 NAME BARBER, W. CRAIG  
1.3 STREET ADDRESS 1727 ELM HILL PIKE  
1.4 CITY-ST-ZIP NASHVILLE TN 37210

2.1 TITLE V  
2.2 NAME CHRIST, ABRAHAM P.  
2.3 STREET ADDRESS 1727 ELM HILL PIKE  
2.4 CITY-ST-ZIP NASHVILLE TN 37210

3.1 TITLE V  
3.2 NAME HAYES, GREGORY A.  
3.3 STREET ADDRESS 1727 ELM HILL PIKE  
3.4 CITY-ST-ZIP NASHVILLE TN 37210

4.1 TITLE T  
4.2 NAME MCDANIEL, F.E.  
4.3 STREET ADDRESS 1727 ELM HILL PIKE  
4.4 CITY-ST-ZIP NASHVILLE TN 37210

5.1 TITLE SD  
5.2 NAME LANGFORD, ROBERT M.  
5.3 STREET ADDRESS 1727 ELM HILL PIKE  
5.4 CITY-ST-ZIP NASHVILLE TN 37210

6.1 TITLE  
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:

ABRAHAM P. CHRIST JR.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-97  
Date

615/231-2022  
Daytime Phone #

CR2E034 (9/96)