

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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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 # F93000005957 (6)

1. Corporation Name  
TPI COMMISSARY, INC.

Principal Place of Business  
3950 RCA BLVD.  
STE. #5001  
PALM BEACH GARDENS FL 33410

Mailing Address  
3950 RCA BLVD.  
STE. #5001  
PALM BEACH GARDENS FL 33410-4227



3. Date Incorporated or Qualified 12/30/1993  
3a. Date of Last Report 03/04/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 1727 Elm Hill Pike		26 1727 ELM HILL PIKE		62-1550525		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
22		27 ATTN TAX DEPT		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Nashville TN		28 NASHVILLE TN		Trust Fund Contribution		<input type="checkbox"/>	
Zip		Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24 37210		29 37210					
Country		Country					
25		30					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301				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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCEO	1.1 TITLE	P
NAME	SHARP, J. GARY	1.2 NAME	BARBER, W. DAVID
STREET ADDRESS	3950 RCA BLVD. STE. #5001	1.3 STREET ADDRESS	1727 ELM HILL PIKE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	1.4 CITY-ST-ZIP	NASHVILLE TN 37210
TITLE	VCS	2.1 TITLE	V
NAME	KENNEDY, ROBERT A	2.2 NAME	CHEIS, ABRAHAM P.
STREET ADDRESS	3950 RCA BLVD. STE. #5001	2.3 STREET ADDRESS	1727 ELM HILL PIKE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	2.4 CITY-ST-ZIP	NASHVILLE TN 37210
TITLE	VT	3.1 TITLE	V
NAME	BURFORD, FREDERICK W	3.2 NAME	HAYES, GREGORY A.
STREET ADDRESS	3950 RCA BLVD. STE. #5001	3.3 STREET ADDRESS	1727 ELM HILL PIKE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	3.4 CITY-ST-ZIP	NASHVILLE TN 37210
TITLE	AS	4.1 TITLE	T
NAME	FORD, LINDA	4.2 NAME	MEDANIEL P.E.
STREET ADDRESS	3950 RCA BLVD. STE. #5001	4.3 STREET ADDRESS	1727 ELM HILL PIKE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	4.4 CITY-ST-ZIP	NASHVILLE TN 37210
TITLE	D	5.1 TITLE	SD
NAME	COHEN, STEPHEN	5.2 NAME	LANB FORD, ROBERT M.
STREET ADDRESS	777 S. FLAGLER PHILLIPS PTE. TOWER E. #909	5.3 STREET ADDRESS	1727 ELM HILL PIKE
CITY-ST-ZIP	WEST PALM BCH. FL	5.4 CITY-ST-ZIP	NASHVILLE TN 37210
TITLE	S	6.1 TITLE	
NAME	KENNEDY, ROBERT A.	6.2 NAME	
STREET ADDRESS	777 S. FLAGLER PHILLIPS PTE. TOWER E., #909	6.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BCH. FL	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. Cheis Jr.* ABRAHAM P CHEIS JR. 4-30-97 615/231-2022  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)