**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F93000005957

TPI COMMISSARY, INC.

Principal Place of Business			Mailing Address			I I I I I I I I I I I I I I I I I I I	I INCIDE THE CAME AND ADDRESS OF THE PARTY O		
NASHVILLE FL 37210			1727 ELM HILL PIKE ATTENTION: TAX DEPARTMENT NASHVILLE TN 37210 US			DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  12/30/1993		
US						3. Date Incorporated or Qualifed			
Principal Place of Business			2a. Mailing Address			4. FEI Number	Applied For		
21 26			26			62-1550525	Not Applicable		
	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Cortiferate of Status Decired 58.	\$8.75 Additional		
22	City & State - City & State -				6. Election Campaign Financing	00 May Be			
_	1 '	3	28			, , , , , , , , , , , , , , , , , , , ,	ded to Fees		
23				Country		This corporation owes the current year Intangible			
	Zip 1			30		Personal Property Tax.	□No		
24		25 25 Curren		<u>'l</u>		10. Name and Address of New Registered Agent			
Name and Address of Current Registered Agent					Nan				
THE PRENTICE-HALL CORPORATION SYSTEM, INC.				81	''				
1201 HAYS STREET			1 0 10 1Cm, 1110.	82	Stre	reet Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301				<u> </u>					
TALLAHASSEE PL 32301		ANASSEE PL 32301		83					
				84	City	FL 85	Zip Code		
1. A by the profile of Court o									
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 registere agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
s	IGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE:						ature required when reinstating) DATE	OTOBO IN 40		
12.		OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRE			
TIT	TLE	P	☐ DELETE	1.1 TITLE			inge [_] Audition		
NAME		LONG, H A		1.2 NAME					
STREET ADDRESS		1727 ELM HILL PIKE		1.3 STREE	T ADDRE	RESS			
CITY-ST-ZIP		NASHVILLE TN		1.4 CITY-ST-ZIP					
TITLE		٧	☐ DELETE	2.1 TITLE		, Cha	inge 🗌 Addition		
NAME		ADAMS, D M		2 2 NAME					
STREET ADDRESS		1727 ELM HILL PIKE		2.3 STREET ADDRESS		RESS			
ļ		NASHVILLE TN			T-ZIP				
CITY-ST-ZIP		-VI	DELETE 3.1				ange Addition		
NAME BALDRIDGE, L V		· · · · · · · · · · · · · · · · · · ·	3.2 NAME						
-		1772 ELM HILL PIKE			T ADDRE	RESS			
} *		NASHVILLE TN		3.4. CITY-5					
CITY-ST-ZIP TITLE		VD	☐ DELETE	4.1 TITLE	)1-ZIP	□ Chi	ange Addition		
		· '-	_ 022210	4.7 THE:			- —		
NAME		MCDANIEL, F.E.				2500			
STREET ADDRESS		1727 ELM HILL PIKE		4.3 STREET ADDR		RESS			
CITY-ST-ZIP		NASHVILLE TN	Morre	4.4 CITY-ST-ZIP		S TChe	inge XAddition		
TITLE		\$	<b>⊠</b> D€LETE	5.1 TITLE		Ted R. Habermann	inge Zavadillosi		
NAME		AMES, R J		5.2 NAME		lea K. Havermann			
STREET ADDRESS		1727 ELM HILL PIKE				RESS 1727 Elm Hill Pike			
CITY-ST-ZIP		NASHVILLE TN		5.4 CITY-S	T-ZIP	Nashville TN 37210			
Τr	TLE		☐ DELETE	6.1 TITLE		☐ Cha	inge		
N	AME		•	6.2 NAME					
87	TREET ANDRESS			6.3 STREE	TADDRE	RESS			

14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90155 022 \*\*\*150.00