

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000202

Entity Name: TOM JAMES COMPANY

FILED  
Apr 12, 2012  
Secretary of State

**Current Principal Place of Business:**

263 SEABOARD LANE  
FRANKLIN, TN 37067

**New Principal Place of Business:**

**Current Mailing Address:**

263 SEABOARD LANE  
FRANKLIN, TN 37067

**New Mailing Address:**

FEI Number: 35-1285878

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CASALENA, SERGIO  
Address: 411 N. CRANBERRY RD  
City-St-Zip: WESTMINSTER, MD 21157

Title: S  
Name: SALYER, WALTER L  
Address: 263 SEABOARD LANE  
City-St-Zip: FRANKLIN, TN 37067

Title: OD  
Name: BROWNE, TODD  
Address: 8470 ALLISON POINTE BLVD  
City-St-Zip: INDIANAPOLIS, IN 46250

Title: VP  
Name: COTTEN, MICHAEL N  
Address: 263 SEABOARD LANE  
City-St-Zip: FRANKLIN, TN 37067

Title: TD  
Name: WILLIAMS, JAMES P  
Address: 263 SEABOARD LANE  
City-St-Zip: FRANKLIN, TN 37067

Title: OD  
Name: HAYS, SPENCER  
Address: 2451 ATRIUM WAY  
City-St-Zip: NASHVILLE, TN 37214

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WALTER L. SALYER

SECR

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date