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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9500002491 (7)
Corporation Name
POWER MANAGEMENT CORPORATION OF TENNESSEE

FILED Feb 06 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	;			
1614 17TH A	Æ. 6 .	1614 17TH AVE	1614 17TH AVE. S.			
NASHMILLE TN 37212		NASHVILLE TN	NASHVILLE TN 37212			
	-				DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified 05/22/1995	
2. Principal Pi	ace of Business	2a. Mailing Addı	ess		4. FEI Number	Applied For
21		26			62-1533376	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			g. Gorimodic or citation becomes	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	— —	untry	8. This corporation owes or has paid the	_ · _ ·
24	25	29	30	<u> </u>	Personal Property Tax due June 30.	☐ Yes ☐ No
9, Name and Address of Current Registered Agent				04 41	10. Name and Address of New Registere	ad Agent
CORPORATE ACCESS, INC.				81 Name		
1116-D THOMASVILLE RD.				82 Street Address (P.O. Box Number is Not Acceptable)		
TAL	LAHASSEE FL 32303					
				83		
				84 City		85 Zip Code
				04) 011)	F	L 2,7 0000
11. Pursuant t	to the provisions of Sections 607.	0502 and 607.1508, Flori	da Statutes, the a	above-named corp	poration 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.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PC	10	LETE 1.11	TITLE		Change Addition
NAME	GORE, JOHN M		1.21	NAME		
STREET ADDRESS	1614 17TH AVE. S.		1.33	STREET ADDRESS		
CITY+ST-ZIP	NASHVILLE TN 37212		1.4 (CITY-ST-ZIP		
TITLE	8	□ DI	LETE 2.11	TITLE		☐ Change ☐ Addition
NAME	GORE, HELEN		2.21	NAME		
STREET ADDRESS	1614 17TH AVE. S.		2.3 \$	STREET ADDRESS		
CITY-ST-ZIP	NASHVILLE TN 37212		2. 4	CITY-ST-ZIP		
TITLE		DI 🔲		TITLE		Change Addition
NAME			3.21	NAME		
STREET ADDRESS			3.3 3	STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-7IP		
TITLE		DI DI		TITLE		Change Addition
NAME		. —	4.2	NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE		□ DI		TITLE		Change Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE	. Ac	☐ DI		IITLE		Change Addition
NAME			•	NAME		•
ı				STREET AODRESS		
STREET ADDRESS	,,,,,,,					
CITY-ST-ZIP		al middle steps (Ultra) along a mode		CHY-ST-ZIP	Section 119 (17/2)/i) Florida Statutes I further	and it that the information

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 is 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.