~ 2003 FOR PROFIT CORPORATION

FILED Mar 17, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** F95000002491 1. Entity Name 03-17-2003 90477 039 ***150.00 POWER MANAGEMENT CORPORATION OF TENNESSEE Principal Place of Business Mailing Address 1616 17TH AVE SOUTH PO BOX 121136 NASHVILLE TN 37212 NASHVILLE TN 37212 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 62-1533376 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE ACCESS, INC. Gore Street Addre (P.O. Box Number is Not Acceptable) 236 E. 6TH AVE. TALLAHASSEE FL 32303 32320 City Zip Code 8. 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. I am familiar with, and accept **SIGNATURE** Signature, up d or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PC TITLE ☐ Delete TITLE K Change ☐ Addition NAME GORE, JOHN M NAME John M. Gore STREET ADDRESS 1616 17TH AVE SOUTH STREET ADDRESS 124 Avenue C CITY-ST-ZIP NASHVILLE TN 37212 CITY-ST-ZIP Apalachicola, FL. TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME HALL, LOUIS C NAME STREET ADDRESS 1616 17TH AVE SOUTH STREET ADDRESS CITY-ST-ZIP NASHVILLE TN 37212 CITY-ST-ZIP TITLE - Delete ---TITLE - . - - -☐ Change ~ 🖃 Addition NAME ADAMS, JUDSON NAME STREET ADDRESS 1616 17TH AVE SOUTH STREET ADDRESS CITY-ST-ZIP NASHVILLE TN 37212 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS

12. Thereby 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 report or supplemental 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 10 or Block 11 if

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7(P

TITLE

NAME

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

John M. Gore

Delete

3/6/03 850/653-1175

Change

☐ Addition