	PROFIT DRPORATION NUAL REPORT 1996		Sand Sec	EPARTMENT OF STATE dra B. Mortham cretary of State OF CORPORATIONS			
 Corporati 	JMENT # Lion Name arcorp, Inc	9500 e. ot Alal	0049 00ma	38)	7000018 -05/23/960	33682 1044014	7
	ce of Business Inion Ave. E 1104 Phis, TN 38	M	failing Address		***200.00		
	Place of Business	***************************************			3. Date Incorporated or Qualifie		Last Report the first.
21 (same)	26 26	・Mailing Address (Sa∽	nes	4. FEI Number 63 - 1131885	······································	Applied For Not Applicable
Suite, Apt	t.#, etc.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$	8.75 Additional
City & Sta	nte		City & State		6. Election Campaign Financing		Fee Required \$5.00 May Be
Zip	Country	28	Zφ	Country	Trust Fund Contribution 8. This corporation has liability for	L!	Added to Fees
24	25 9. Name and Addres	29 Ss of Current Regis	tered Agent	[30]	Florida Statutes	es X No	
The P	rentice Hall	Corp. Syst	em, Inc.	81 Name	10. Name and Address of New	/ Hegistered Age	nt
120	1 Hays St. ahassee, Fl		7261	82 Street Ad	ddress (P.O. Box Number is Not Accept	table)	
							· · · · · · · · · · · · · · · · · · ·
TAIL	anassee, Fi	Brida >	7301	83			
1411	a hassee, Fi	Brida >	c 201	83 84 City		pr. 8	5 Zip Code
11. Pursuant	to the provisions of Section	ns 607.0502 and 60	7.1508, Florida Statu	84 City	poration submits this statement for the p	FL I	
11. Pursuant or registe familiar w	to the provisions of Soution	ns 607.0502 and 60	7.1508, Florida Statu	84 City	poration submits this statement for the popularion of directors. I hereby accept the appropriate the second control of directors and the second control of directors and the second control of directors.	FL I	
11. Pursuant or registe familiar w SIGNATURE	to the provisions of Sections described agent, or both, in the Soith, and accept the obligations of Section and accept the obligations of Section 2015.	ns 607.0502 and 60 State of Florida Such ons of, Section 607.1	7.1508, Florida Statu change was author 0505, Florida Statute	B4 City Utles, the above-named corplized by the corporation's bias.	guired when reinstating	Durpose of changin opointment as regis	ng its registered office stered agent. I am
11. Pursuant or registe familiar w SIGNATURE	to the provisions of Sections described agent, or both, in the Soith, and accept the obligations of Section and accept the obligations of Section 2015.	ns 607.0502 and 60 State of Florida Such ons of, Section 607.0 mgsterid agent and the Ita FICERS AND DIREC	7.1508, Florida Statu change was author 0505, Florida Statute	B4 City utes, the above-named corplized by the corporation's best. uote Registered Agent signature registration.	cond or directors. Thereby accept the ap	DATE DATE DATE	ng its registered office stered agent. I am
11. Pursuant or registe familiar w SIGNATURE 12.	to the provisions of Sectioned agent, or both, in the Signature typed or perited raine of OF Director/free Harry Miller	ns 607,0502 and 60 State of Florida Such ons of, Section 607,0 registered apert and the tra FICERS AND DIREC	7.1508, Florida Statu change was author 0505, Florida Statute epicaro	B4 City Utles, the above-named corplized by the corporation's bias.	guired when reinstating	Durpose of changin opointment as regis	ng its registered office stered agent. I am
11. Pursuant or registe familiar w. SIGNATURE. 12. TITLE NAME. STREET ADDRESS	to the provisions of Sectioned agent, or both, in the Signat and accept the obligation of Signat results of Signat resul	ns 607.0502 and 60 State of Florida Such ons of, Section 607.1 mgsterid agent and the Ita FICERS AND DIRECTION OF THE INC., Suite I	7.1508, Florida Statu 7.1508, Florida Statut 0505, Florida Statute Pricato b TORS	B4 City Utes, the above-named corpliated by the corporation's best. NOTE Registered Agent signature req. 13. 1.17IILE	guired when reinstating	DATE DATE DATE	g its registered office stered agent. I am ECTORS IN 12 ange
11. Pursuant or registe familiar w. SIGNATURE. 12. TITLE. NAME. STREET ADDRESS. CITY-ST-ZP.	to the provisions of Sectioned agent, or both, in the Signature typed or perited raine of OF Director/free Harry Miller	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgstend agert and the Froers AND DIRECTION TO THE CONTROL OF THE	7.1508, Florida Statt. I change was author. 0505, Florida Statute FPRATO A TORS DELETE	B4 City utos, the above-named corpliance by the corporation's bos. NOTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - S1-7i ²	guired when reinstating	DATE TATE Ch	ig its registered office stered agent. I am ECTORS IN 12 lange Addition
11. Pursuant or registe familiar w. SIGNATURE: 12. Title NAME STREET ADDRESS CITY- ST- ZIP TITLE VAME	to the provisions of Section and agent, or both, in the Soith, and accept the obligation of Section	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgstend agert and the Francisco Technology of the first state of	7.1508, Florida Statu 7.1508, Florida Statut 0505, Florida Statute Pricato b TORS	B4 City utes, the above-named corp ized by the corporation's bies. DTE Registered Agent signature regi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	guired when reinstating	DATE DATE DATE	ig its registered office stered agent. I am ECTORS IN 12 lange Addition
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME. STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligations of Section of Sections of Sections of Section of Sectio	ns 607.0502 and 60 state of Florida Suchons of, Section 607.0 mgaterial agent and Mr. Ita FICERS AND DIRECTION TO THE CONTROL OF T	7.1508, Florida Statt. I change was author. 0505, Florida Statute FPRATO A TORS DELETE	B4 City Utos, the above-named corp ized by the corporation's bigs. VOTE Projectived Agent signature required. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - S1 - 719 2.1 TITLE	guired when reinstating	DATE TATE Ch	ig its registered office stered agent. I am ECTORS IN 12 lange Addition
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligation of Section o	ns 607.0502 and 60 state of Florida Suchons of, Section 607.0 mgaterial agent and Mr. Ita FICERS AND DIRECTION TO THE CONTROL OF T	7.1508, Florida Statt. I change was author. 0505, Florida Statute FPRATO A TORS DELETE	B4 City Utles, the above-named corporation's bigs. COTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - S1 - 71P 2.1 TITLE 2.7 NAME 2.3 STREET ADDRESS 2.4 CITY - S1 - 72P	guired when reinstating	DATE TATE Ch	g its registered office stered agent. I am ECTORS IN 12 lange Addition
11. Pursuant or registe familiar w. SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligation of Section of Sections of S	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgstend agent and the Italian Floers AND DIRECTION SUCH TOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN	7.1508, Florida Statu o change was author 0505, Florida Statute envicato ••••••••••••••••••••••••••••••••••••	### City Index, the above-named corporation's bigs. #### VOTE Registered Agent signature requirements for the comporation's bigs. ###################################	guired when reinstating	DATE TATE Ch	ig its registered office stered agent. I am ECTORS IN 12 lange Addition
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	to the provisions of Sectioned agent, or both, in the Signature speed or printed raine of OF Director/Free Harry Miller & Bunion Av Memphis Director/V. IV Mash bur 4721 Morri Mobile, At Treasurer Thomas May 4721 Morri	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgstend agent and the Ita FICERS AND DIRECT ident ., Swite I TN 3810 P. Son Dr. 36609	7.1508, Florida Statu o change was author 0505, Florida Statute envicato ••••••••••••••••••••••••••••••••••••	### City Index, the above-named corporation's bigs. #### City ###################################	guired when reinstating	DATE TATE Ch	g its registered office stered agent. I am ECTORS IN 12 lange Addition
11. Pursuant or registe familiar w. SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligation of Section of Sections of S	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgstend agent and the Ita FICERS AND DIRECT ident ., Swite I TN 3810 P. Son Dr. 36609	7.1508, Florida Statu change was author. 0505, Florida Statute 0505, Florida Statute 0506 0507 0507 0507 0507 0507 0507 0507	### City Index, the above-named corporation's bigs. Index the above-named corporation's bigs. #### Table #### Table #### Table #### Table ##### Table ##################################	guired when reinstating	DATE DATE DATE Ch	g its registered office stered agent. I am ECTORS IN 12 hange
11. Pursuant or registe familiar w. SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligation of Section of Secretary Miller Mobile, All Secretary Sohn Alex	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agent and the Ita FICERS AND DIRECT INTO \$810 P. SON DY. 36609 Lander	7.1508, Florida Statu o change was author 0505, Florida Statute envicato ••••••••••••••••••••••••••••••••••••	## City Index, the above-named corporation's bees. ### Index the corporation's bees. #### Index in the corporation's bees. ##################################	guired when reinstating	DATE TATE Ch	g its registered office stered agent. I am ECTORS IN 12 hange
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE VAME STREET ADDRESS STREET ADDRESS	to the provisions of Section and agent, or both, in the Smith, and accept the obligation of Section of Secretary Sohn Alexandral Morri Mobile, Alexandral Morri Mo	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu change was author. 0505, Florida Statute 0505, Florida Statute 0506 0507 0507 0507 0507 0507 0507 0507	## City Index, the above-named corporation's bees. ### Index to be above-named corporation's bees. #### Index to be above-named corporation's bees. ##################################	guired when reinstating	DATE DATE DATE Ch	g its registered office stered agent. I am ECTORS IN 12 hange
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligation of Section of Secretary Miller Mobile, All Secretary Sohn Alex	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu o change was author 0505, Florida Statute stratute in the control of the c	## City Joseph Components of Components of State of State of Agent signature required Agent Ag	guired when reinstating	DATE DATE FICERS AND DIR Ch	g its registered office stered agent. I am ECTORS IN 12 lange
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME	to the provisions of Section and agent, or both, in the Smith, and accept the obligation of Section of Secretary Sohn Alexandral Morri Mobile, Alexandral Morri Mo	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu change was author. 0505, Florida Statute 0505, Florida Statute 0506 0507 0507 0507 0507 0507 0507 0507	### City ### City #### City ###################################	guired when reinstating	DATE DATE DATE Ch	g its registered office stered agent. I am ECTORS IN 12 lange
11. Pursuant or registe familiar w SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE T	to the provisions of Section and agent, or both, in the Smith, and accept the obligation of Section of Secretary Sohn Alexandral Morri Mobile, Alexandral Morri Mo	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu o change was author 0505, Florida Statute stratute in the control of the c	### City ### City #### #### #### #### #### #### ####	guired when reinstating	DATE DATE FICERS AND DIR Ch	g its registered office stered agent. I am ECTORS IN 12 lange
11. Pursuant or registe familiar w. SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	to the provisions of Section and agent, or both, in the Smith, and accept the obligation of Section of Secretary Sohn Alexandral Morri Mobile, Alexandral Morri Mo	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu Othange was author 0505, Florida Statute system	## City ### City ### City ### City ### City #### City ###################################	guired when reinstating	DATE DATE DATE FICERS AND DIR Ch	g its registered office stered agent. I am ECTORS IN 12 lange
11. Pursuant or registe familiar w SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE	to the provisions of Section and agent, or both, in the Smith, and accept the obligation of Section of Secretary Sohn Alexandral Morri Mobile, Alexandral Morri Mo	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu o change was author 0505, Florida Statute stratute in the control of the c	B4 City Mas, the above-named corriged by the corporation's boss. NOTE Registered Agent signature required to the corporation's boss. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - S1 - 7i2 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City - S1 - 7i2 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City - S1 - 7i2 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City - S1 - 7i2 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	guired when reinstating	DATE DATE FICERS AND DIR Ch	g its registered office stered agent. I am ECTORS IN 12 lange
11. Pursuant or registe familiar w SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS	to the provisions of Section and agent, or both, in the Smith, and accept the obligation of Section of Secretary Sohn Alexandral Morri Mobile, Alexandral Morri Mo	ns 607.0502 and 60 State of Florida Suchons of, Section 607.0 mgsterist agert and the Ita FICERS AND DIRECT INTERS AND DIREC	7.1508, Florida Statu Othange was author 0505, Florida Statute system	## City ### City ### City ### City ### City #### City ###################################	guired when reinstating	DATE DATE DATE FICERS AND DIR Ch	g its registered office stered agent. I am ECTORS IN 12 lange
11. Pursuant or registe familiar w. SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME TREET ADDRESS CITY-ST-ZIP TITLE VAME VAREET ADDRESS CITY-ST-ZIP VALL VALL VALL VALL VALL VALL VALL VAL	to the provisions of Sectioned agent, or both, in the Smith, and accept the obligation of Sectioned agent, or both, in the Signature Speed or present annual Conference of the Secretary Mash bury and the Secretary Mobile, All	ns 607.0502 and 60 State of Florida Suchons of, Section 607.1 mgsterist agert and the Ita FICERS AND DIRECT ident ., Swite I TN 3810 P. 36609 Lander ison Dr. 36609	7.1508, Florida Status ochange was author 0505, Florida Statuse oppositions	B4 City Joseph Street Address Street Stree	guired when reinstating	DATE DATE FICERS AND DIR Ch Ch	g its registered office stered agent. I am ECTORS IN 12 lange