

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 18, 2004 08:00 AM
Secretary of State

DOCUMENT # F96000004641

1. Entity Name
THE WASHINGTON COMPANY



Principal Place of Business

263 SEABOARD LANE
FRANKLIN, TN 37067

Mailing Address

P.O. BOX 305140
NASHVILLE, TN 37230

DO NOT WRITE IN THIS SPACE



03102004 No Chg-P CR2E034 (10/03)

4. FEI Number
62-1421323

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	HAYS, SPENCER
STREET ADDRESS	2451 ATRIUM WAY
CITY-STATE-ZIP	NASHVILLE, TN 37214
TITLE	S
NAME	HICKMAN, KEVIN E
STREET ADDRESS	2451 ATRIUM WAY
CITY-STATE-ZIP	NASHVILLE, TN 37214
TITLE	P
NAME	COOK, KINNY
STREET ADDRESS	263 SEABOARD LANE
CITY-STATE-ZIP	FRANKLIN, TN 37067
TITLE	CFO
NAME	DENNEY, GORDON
STREET ADDRESS	263 SEABOARD LANE
CITY-STATE-ZIP	FRANKLIN, TN 37067
TITLE	C
NAME	SALYER, WALT
STREET ADDRESS	263 SEABOARD LANE
CITY-STATE-ZIP	FRANKLIN, TN 37067
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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08/18/04-80002-003 550.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEVIN E. HICKMAN, SECRETARY

8/10/04

Date

615-391-2930

Daytime Phone #