## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Mar 19, 2001 8:00 am Secretary of State DOCUMENT # F96000004911 1. Entity Name VPI SALES COMPANY 03-19-2001 90038 023 \*\*\*150.00 Principal Place of Business Mailing Address 5706 HWY 153 5706 HWY 153 HIXSON TN 37343 HIXSON TN 37343 933378 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1653917 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) CCEO -TITLE Delete TITLE Chief FINAUCIAL OFFICER Change NAME NAME CASEY, CHARLES F 1. JOHNSTON 412 MAGICAL VIOW DR MATTANOOGA, Th. 3742 STREET ADDRESS STREET ADDRESS 1635 EDGEWOOD CIRCLE CITY-ST-ZIP CITY-ST-ZIP CHATTANOOGA TN 37405 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME CASEY, MARIE E STREET ADDRESS STREET ADDRESS 1635 EDGEWOOD CIRCLE CITY-ST-7IP CITY-ST-7IP CHATTANOOGA TN 37405 TITLE VCP ☐ Delete TITLE ☐ Change ☐ Addition NAME CASEY, CHARLES F II NAME STREET ADDRESS STREET ADDRESS 32 COOL SPRINGS RD CITY-ST-7IP CITY-ST-ZIP SIGNAL MOUNTAIN TN 37377 Change Addition ☐ Delete TITLE NAME NAME CASEY, J. DOUG STREET ADDRESS STREET ADDRESS 2621 CRESCENT CLUB DR CITY-ST-ZIP CITY-ST-ZIP HIXSON TN 37343 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CASEY, THOMAS A NAME STREET ADDRESS STREET ADDRESS 1721 SHADOWOOD PKWY NW CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30339 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME KENT, JONATHAN STREET ADDRESS STREET ADDRESS 832 GEORGIA AVE, SUITE 1000 CITY-ST-ZIP CITY-ST-ZIP CHATTANOOGA TN 37402 13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Charles F. CASEY II 313.01