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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPAREMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 F9700002569 (8)

DOCUMENT # F9700002569
1. Corporation Name
CORRECTIONS CORPORATION OF AMERICA

FILED Jun 01 1998 8:00am Secretary of State



							 		
Principal Place of Business Mailing Address									
10 BURTON H	HLLS BOULEVARD	10 BURTON HILLS BOULEVARD							
NASHVILLE TN 37215		NASHVILLE TN 37215				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or	·	SPACE	
						05/14/1997	Qualified		1
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	10 110	Ap	plied For
21		26				<applied for<="" th=""><th>62-1156</th><th>No.</th><th>t Applicable</th></applied>	62-1156	No.	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status D	esired	\$8.75 A	
22		27				o, commone or ordina a		Fee Re	<u> </u>
City & State	1	City & State				6. Election Campaign Fi	· —	\$5.00	
23		28	7			Trust Fund Contribution		Added to	
Zip	Country	Zip	Cour	itry	j	8. This corporation owes			angible] No
24	1 25 9. Name and Address of Current	Posistered Acent	30			Personal Property Tax 10. Name and Address (1 140
AID.		Hohisteren Affetti		B1 Nam	ne	10, Italio and Addioss	or mon magnatore	Agont	
	AI SERVICES, INC.		į						
526 E PARK AVENUE TALLAHASSEE FL 32301				82 Street Address (P.O. Box Number is Not Acceptable)					
IAL	LAMASSEE FL 32301		ŀ	83					
			Ī	B4 City	·		FI	85 Zip (Code
	10.007.01.00	1 002 4000 Electedo Ctot.	loo the ob		ad associ	otion subroite this stateme		■ of observing its	e registered
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
agent. I ar	n fa miliar with, and accept the oblight	Forts of, Section 607.0505, F	lorida Stati	ites					
SIGNATURE .	Stgnature: typed or printed name of registerest ages	and the diagonal able (NO	1E: Begistered	Agent signa	ture required	when reinstating)	DATE		,
12.	OFFICERS AND		13.			ADDITIONS/CHANGES	TO OFFICERS AN	ID DIRECTOR	S IN 12
TITLE	CD	DELETE	1.1 70	LF.	CD			Change	Addition
NAME	CRANTS, DOCTOR R		1.2 NA	V tE	Con	nts, Doctor R.			[:
STREET ADDRESS	102 WOODMONT BLVD., STE	800	1.3 SII	REET ADORES	ss IOZ	aurton Hills Bou	levard		li li
CITY-ST-ZIP	NASHVILLE TN		1.4 CH	Y - \$T - ZIP	NA	shrille, TN 37	215	/	
TITLE	VST	DELETE	2.1 T/I	LE	INCT	•		✓ Change	Addition
NAME	MASSENGALE, DARRELL K		2.2 NA	ME	MAS	sengale, Darcre unton Yulks Bou	HIK.		
STREET ADDRESS	102 WOODMONT BLVD., STE	800	2.3 ST	REET ADDRES	ss 10 🕰	urton Yülks Bou	lewid		\
CITY-ST-ZIP	NASHVILLE TN		2. 4 Cl	Y-ST-ZIP		hulle, IN 372			
TITLE	V	☐ DELETE	3.1 TIT	LF	\(\cdot \)			Change	Addition
NAME	VICK III, GAY E		3.2 NA	ME	Vic	CIII, GAY E.			
STREET ADDRESS	102 WOODMONT BLVD., STE	800	3.3 \$1	REET ADDRES	ss to 4	ewaton Yulis &	brand		
CITY-ST-ZIP	NASHVILLE TN		3 4 CI	Y - ST - <i>Z</i> IP	NA.	WHIE TH 31	215		
TITLE	V	☐ D€LETE	4.1 3/1	LE	11.7	•		Change	☐ Addition
NAME	BLANCHETTE JR, CHARLES A		4. 2 N/	MÉ	Blar	whethe Jr., C	whas A		
STREET ADDRESS	102 WOODMONT BLVD., STE	800	4.3 \$1	KEET ADDRES	ss 10 🕏	suidon 4úils 65	wernd		1
CITY-ST-ZIP	NASHVILLE TN		4.4 CI	Y-ST-ZIP	Nie	hville, TN 302	15		
TITLE	V	DELETE	5.1 TIF	LE	11.7	-		Change	Addition
NAME	Bradby, Dennis e		5 2 NA	ME	BM	dby Dennis E Surdon Yvills &			
STREET ADDRESS	102 WOODMONT BLVD., STE	800	5381	REET ADDRES	88 1 <u>0</u> 4	suition Yulls &	pywamos		
CITY-ST-ZIP	NASHVILLE TN		5.4 CH	Y-ST-ZIP	NE	hirile TN 30:	25		
TITLE	V	DELETE	6.1 TiT		V		_	Change	☐ Addition
NAME	COOPER, LINDA G		6.2 NA	ME		DEIL, LINDA (
STREET ADDRESS	102 WOODMONT BLVD., STE	800	6.3 ST	KELT ADDRES	ss 10 4	Burton Yills	Boulewid		
CITY+ST-7IP	NASHVILLE TN			Y- \$T- 7IP	1/342	anville TN 3	1215		
14. I hereby o	ertify that the information supplied wil	In this filing does not qualify	for the exc	mption st	tated in Se	ection 119.07(3)(i), Florida	Statutes, I further	certify that the	information

4. 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 informatic indicated on this armual report or supplienchal 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 trustor 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 atjachnicity if this address.

CICNATURE (DANS # 1/1/

4/23/98