


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90150 041 ***150.00

DOCUMENT # F97000002727 1. Entity Name CBL HOLDINGS I, INC.	
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Principal Place of Business
2030 HAMILTON PLACE BLVD
SUITE 500
CHATTANOOGA, TN 37421-6000

Mailing Address
2030 HAMILTON PLACE BLVD
SUITE 500
CHATTANOOGA, TN 37421-6000



04112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 62-1690607	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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 reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

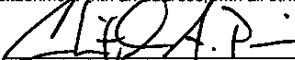
\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CCED LEBOVITZ, CHARLES B 2030 HAMILTON PLACE BLVD, SUITE 500 CHATTANOOGA, TN 374216000
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VFTD FOY, JOHN N 2030 HAMILTON PLACE BLVD, SUITE 500 CHATTANOOGA, TN 374216000
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD LEBOVITZ, STEPHEN D 800 SOUTH STREET, STE 395 WALTHAM, MA 02154 02453-1436
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP GIMPLE, RONALD S 2030 HAMILTON PLACE BLVD, SUITE 500 CHATTANOOGA, TN 374216000
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP LANDRESS, BEN S 2030 HAMILTON PLACE BLVD, SUITE 500 CHATTANOOGA, TN 374216000
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVPC STEPHAS, GU'S 2030 HAMILTON PLACE BLVD, SUITE 500 CHATTANOOGA, TN 374216000

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Christopher A. Price
Tax Manager/Asst Secretary

4/21/05

Date

423/855-0001

Daytime Phone #