

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90203 017 ***150.00

DOCUMENT # F97000002727

1. Entity Name
CBL HOLDINGS I, INC.



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**

60030660



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04072006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
62-1690607

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. 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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CCED
LEBOVITZ, CHARLES B
2030 HAMILTON PLACE BLVD, SUITE 500
CHATTANOOGA, TN 374216000** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COBORO ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VFTD
FOY, JOHN N
2030 HAMILTON PLACE BLVD, SUITE 500
CHATTANOOGA, TN 374216000** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VOBCFOID ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
LEBOVITZ, STEPHEN D
800 SOUTH STREET, STE 395
WALTHAM, MA 02453** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WALTHAM, MA 02453-1436 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP
GIMPLE, RONALD S
2030 HAMILTON PLACE BLVD, SUITE 500
CHATTANOOGA, TN 374216000** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVPG
VICKIE BERGEL
2030 HAMILTON PLACE BLVD., SUITE 500
CHATTANOOGA, TN 37421-6000** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
LANDRESS, BEN S
2030 HAMILTON PLACE BLVD, SUITE 500
CHATTANOOGA, TN 374216000** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVPC
STEPHAS, GUS
2030 HAMILTON PLACE BLVD, SUITE 500
CHATTANOOGA, TN 374216000** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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*

Christopher A. Price, Tax Mgr./Asst. Sec.

4/7/06

423/855-0001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #