

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001052

1. Entity Name

KEMMONS WILSON, INC.

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90090 050 ***150.00

Principal Place of Business

1629 WINCHESTER ROAD
MEMPHIS TN 38116-3504

Mailing Address

1629 WINCHESTER ROAD
MEMPHIS TN 38116-3519

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

62-1723152

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

LOWER, BRIAN

8505 W. IRLO BRONSON, BRONSON MEMORIAL HWY
KISSIMMEE FL 34747

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete

NAME
CD
WILSON, KEMMONS
STREET ADDRESS
1629 WINCHESTER ROAD
CITY-ST-ZIP
MEMPHIS TN

TITLE ☐ Delete

NAME
PD
WILSON, SPENCE
STREET ADDRESS
1629 WINCHESTER ROAD
CITY-ST-ZIP
MEMPHIS TN

TITLE ☐ Delete

NAME
V
WILSON, ROBERT A
STREET ADDRESS
1629 WINCHESTER ROAD
CITY-ST-ZIP
MEMPHIS TN

TITLE ☐ Delete

NAME
V
WILSON JR, C K
STREET ADDRESS
1629 WINCHESTER ROAD
CITY-ST-ZIP
MEMPHIS TN

TITLE ☐ Delete

NAME
VS
WALLIN, R E
STREET ADDRESS
1629 WINCHESTER ROAD
CITY-ST-ZIP
MEMPHIS TN

TITLE ☐ Delete

NAME
VT
PETTY III, JOHN H
STREET ADDRESS
1629 WINCHESTER ROAD
CITY-ST-ZIP
MEMPHIS TN

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

John H. Petty III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-00

Date

Daytime Phone #

901-346-8800

CR2F034 (9/93)