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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F98000002808**

1. Corporation Name

BUSH ACQUISITION SUB, INC.

Principal Place of Business	Mailing Address
SIX CADILLAC DR., STE. 400 BRENTWOOD TN 37027	SIX CADILLAC DR., STE. 400 BRENTWOOD TN 37027

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 05/18/1998

4. FEI Number: 62-1738946 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	PDV	☒ Change ☐ Addition
NAME	SIELBECK, ALAN R		1.2 NAME	SIELBECK, ALAN R	
STREET ADDRESS	111 WESTWOOD PL., STE. 420		1.3 STREET ADDRESS	SIX CADILLAC DRIVE, SUITE 400	
CITY-ST-ZIP	BRENTWOOD TN 37027		1.4 CITY-ST-ZIP	BRENTWOOD, TN 37027	
TITLE	V	☐ DELETE	2.1 TITLE	V	☒ Change ☐ Addition
NAME	LADERMAN, LOU N		2.2 NAME	LADERMAN, LOU N	
STREET ADDRESS	111 WESTWOOD PL., STE. 420		2.3 STREET ADDRESS	SIX CADILLAC DRIVE, SUITE 400	
CITY-ST-ZIP	BRENTWOOD TN 37027		2.4 CITY-ST-ZIP	BRENTWOOD, TN 37027	
TITLE	V	☐ DELETE	3.1 TITLE	V	☒ Change ☐ Addition
NAME	TAYLOR, ALFRED W III		3.2 NAME	TAYLOR, ALFRED W III	
STREET ADDRESS	111 WESTWOOD PL., STE. 420		3.3 STREET ADDRESS	SIX CADILLAC DRIVE, SUITE 400	
CITY-ST-ZIP	BRENTWOOD TN 37027		3.4 CITY-ST-ZIP	BRENTWOOD, TN 37027	
TITLE	SD	☐ DELETE	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	SCHOFIELD, ANTHONY M		4.2 NAME	SCHOFIELD, ANTHONY M	
STREET ADDRESS	111 WESTWOOD PL., STE. 420		4.3 STREET ADDRESS	SIX CADILLAC DRIVE, SUITE 400	
CITY-ST-ZIP	BRENTWOOD TN 37027		4.4 CITY-ST-ZIP	BRENTWOOD, TN 37027	
TITLE	AS	☒ DELETE	5.1 TITLE	S	☐ Change ☒ Addition
NAME	AGEE, THERESA		5.2 NAME	TRIPLETT, C.E.	
STREET ADDRESS	111 WESTWOOD PL., STE. 420		5.3 STREET ADDRESS	SIX CADILLAC DRIVE, SUITE 400	
CITY-ST-ZIP	BRENTWOOD TN 37027		5.4 CITY-ST-ZIP	BRENTWOOD, TN 37027	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (11/98)

14. 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 annual report or supplemental 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 trustee 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 attachment with an address, with all other like empowered.

SIGNATURE: _____ Anthony M. Schofield (615)371-9990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #