2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2002 8:00 am Secretary of State DOCUMENT # F98000002850 1. Entity Name PROFESSIONAL PROJECT SERVICES, INC. 05-15-2002 90176 038 ***158.75 Principal Place of Business Mailing Address 1060 COMMERCE PARK DRIVE 410 NORTH CEDAR BLUFF ROAD SUITE 400 SUITE 102 OAK RIDGE TN 37830 KNOXVILLE TN 37923 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1661329 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee.Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SABOURIN, THOMAS D Street Address (P.O. Box Number is Not Acceptable) 6501 PARK OF COMMERCE BOULEVARD **SUITE 2000 BOCA RATON FL 33487** City Zip Code FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete ☐ Change NAME GOSS, L. BARRY. NAME Van Hook, Robert I. STREET ADDRESS 1060 COMMERCE PARK DRIVE SUITE 400 STREET ADDRESS 1060 Commerce Park Drive, Suite 400 CITY-ST-ZIP OAK RIDGE TN 37830 CITY-ST-ZIP Oak Ridge, TN 37830 TITLE ☐ Delete TITLE NAME MARTIN, PAUL W JR. NAME Martin, Paul W. Jr. **ETREET ADDRESS** STREET ADDRESS 908 LAUREL HILL ROAD 908 Laurel Hill Road CITY-ST-7tP CITY-ST-ZIP **KNOXVILLE TN 37923** Knoxville, TN 37923 TITLE **Delete** TITI F ☐ Change Shelton, Gen. (Ret.) Henry H. D NAME GREEN, KELLEY NAME 1060 Commerce Park Drive, Suite 400 STREET ADDRESS 1060 COMMERCE PARK DRIVE SUITE 400 STREET ADDRESS Oak Ridge, TN 37830 CITY-ST-ZIP OAK RIDGE TN 37830 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME WILLIS, BILL NAME Morgan, Hugh W. STREET ADDRESS 3806 FREELS ROAD STREET ADDRESS 1060 Commerce Park Drive, Suite 400 CITY-ST-ZIP FRIENDSVILLE TN 37737 CITY-ST-ZIP Oak Ridge, TN 37830 TITLE Delete TITLE ☐ Change ▼ Addition NAME PIENKOWSKI, MAREK M NAME Negendank, Gilbert A. STREET ADDRESS 7417 KINGSTON PIKE SUITE 101 STREET ADDRESS 1060 Commerce Park Drive, Suite 400 CITY-ST-ZIP **KNOXVILLE TN 37919** CITY-ST-ZIP Oak Ridge, TN 37830 TITLE **X** Delete TITLE ☐ Change ☐ Addition NAME GRINDSTAFF, E. DOUGLAS NAME STREET ADDRESS 6210 BELLE RIVER DRIVE STREET ADDRESS CITY-ST-ZIP **BRENTWOOD TN 37027** 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 truled empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

ess, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(865) Daytime Phone #

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