2004 FOR PROTECTION ANNUAL REPORT

FILED
May 03, 2004 08:00 AN
Secretary of State

DOCUMENT # F9800 1. Entity Name SC OF TENNESSEE, INC.		
Principal Place of Business	Mailing Address	<u> </u>
13323 THESSALY	13323 THESSALY	

13323 THES UNIVERSAL (SALY 1	13323 THESSALY INIVERSAL CITY, TX 78148	TO TENNESSEE				
0	O NOT WRITE II	40 SE 45 SE	CE	04262004 4. FEI Number 75-261 5. Certificate		\$8.75 Fee Rec	Applied For Not Applicable Additional
1200 SQU	ORATION SYSTEM TH PINE ISLAND ROAD ON, FL 33324		Manager 1228		NOT WE		
8. The above the obligat SIGNATURE	named entity submits this statement for the plans of registered agent. Signature, typed or printed name of registered agent and tige	en og været og	ed office or registe		* * * * *	DATE	vith, and accept
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		5.00 May Be Ided to Fees	U000001 05/04/04~8	30033-018 	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE C MORRIS, JOHN A 870 TYNE BLVD. NASHVILLE, TN 37220	CTORS	_ ·		ing and the second of the seco	*	
TITLE NAME STREET ADDRESS CXTY-ST-ZIP TITLE	TS HARDISON, BRENDA 3401 WEST END AVENUE, STE. 685 NASHVILLE, TN 37203 P	<u> نواد در مو مو مو ـ ب</u>				<u>.</u>	
name Street address City-St-Zip Title	MORRIS, ALFRED H 970 PARK AVENUE NEW YORK, NY 10028 D		*		NOT WE		
NAME STREET ADDRESS CITY-ST-ZIP TITLE	MORRIS, JULIA 870 TYNE BLVD. NASHVILLE, TN 37220	<u> </u>			- <u>-</u> -		· · · · · · · · · · · · · · · · · · ·
NAME STREET ADDRESS CITY-ST-ZIP		to to the second	y Torrest		- -		. —
TITLE NAME STREET ADDRESS CITY-ST-ZIP					**************************************		

12. I hereby certify that the information supplied with this filling 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 lift empowered.

SIGNATURE: _

John A. Morris JC 4/30/04 (6(5)665-444)