

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

DOCUMENT # **F98000003613**

1. Corporation Name  
**ARC SEMINOLE, INC.**

Principal Place of Business  
**111 WESTWOOD PLACE, SUITE 402  
BRENTWOOD TN 37027**

Mailing Address  
**111 WESTWOOD PLACE, SUITE 402  
BRENTWOOD TN 37027**

**FILED**  
**Mar 01, 1999 8:00 am**  
**Secretary of State**

03-01-1999 90163 008 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/24/1998**

4. FEI Number

**APPLIED FOR 62-1743320**

Applied For

Not Applicable

5. Certificate 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

9. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.  
526 EAST PARK AVE.  
TALLAHASSEE FL 32301**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CEO** ☐ DELETE  
NAME **SHERIFF, W.E.**  
STREET ADDRESS **111 WESTWOOD PLACE, SUITE 402**  
CITY-ST-ZIP **BRENTWOOD TN 37027**

TITLE **PCOO** ☐ DELETE  
NAME **COATES, CHRISTOPHER J**  
STREET ADDRESS **111 WESTWOOD PLACE, SUITE 402**  
CITY-ST-ZIP **BRENTWOOD TN 37027**

TITLE **EVST** ☐ DELETE  
NAME **HICKS, GEORGE T**  
STREET ADDRESS **111 WESTWOOD PLACE, SUITE 402**  
CITY-ST-ZIP **BRENTWOOD TN 37027**

TITLE **EVP** ☐ DELETE  
NAME **KAESTNER, H. TODD**  
STREET ADDRESS **111 WESTWOOD PLACE, SUITE 402**  
CITY-ST-ZIP **BRENTWOOD TN 37027**

TITLE **EVP** ☐ DELETE  
NAME **MONEY, JAMES T**  
STREET ADDRESS **111 WESTWOOD PLACE, SUITE 402**  
CITY-ST-ZIP **BRENTWOOD TN 37027**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0523519