

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F98000004835

1. Entity Name

FIRSTPROPERTIES, INC.(OF TENNESSEE).



Principal Place of Business

202 HERITAGE PARK DRIVE
MURFREESBORO, TN 37129-1556

Mailing Address

202 HERITAGE PARK DRIVE
MURFREESBORO, TN 37129-1556



04132004 No Chg-P CR2E034 (10/03)

4. FEI Number

62-1603902

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE C
NAME SASSER, GARY D
STREET ADDRESS PERIMETER PLACE ONE, 518 OLD KENTUCKY ROAD
CITY- ST- ZIP COOKEVILLE, TN 38502

TITLE PVT
NAME WILSON, GARY L
STREET ADDRESS 202 HERITAGE PARK DRIVE
CITY- ST- ZIP MURFREESBORO, TN 371291556

TITLE VS
NAME BEENY, DAVID R
STREET ADDRESS 202 HERITAGE PARK DRIVE
CITY- ST- ZIP MURFREESBORO, TN 371291556

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000118378
04/19/04-80057-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David R. Beeny SECRETARY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/04

Date

615-890-9229

Daytime Phone #