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 # F98000005996 1. Corporation Name

FREEDOM GROUP MANAGEMENT COMPANY, INC.

Principal Place of Business								
111 WESTWOOD PLACE.	STE 402							

Mailing Address

111 WESTWOOD PLACE. STE 402

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90184 043 ***150.00



NASHVILLE TN	I 37027 NASHVILLE TN 37027				DO NOT WRITE IN THIS SPACE						
							3. Date Incorporated or Qualifed			,	
							10/28/1998				
2. Principal Pl	lace of Business		2a. Mailing Address				4. FEI Number			Applied	For
21			26				-APPLIED-FOR 65-0366	<u>, ay</u>	<u>a</u>	Not App	licable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired			75 Addition	
22			27				S. Continued of Change Decirios		Fe	e Require	d
City & State	е		City & State				6. Election Campaign Financing			00 мау	
23			28				Trust Fund Contribution			led to Fee	95
Zip		Country	Zip		intry		8. This corporation owes the current ye				_
24	25		29	30	_		Personal Property Tax.		Yes	□Ne	<u> </u>
	9. Name and	Address of Current	Registered Agent		81	Name	10. Name and Address of New Regis	ered A	gent		
NPAI	SERVICES, IN	IC.			"	Name					
	E. PARK AVEN				82 Street Address (P.O. Box Number is Not Acceptable)						
	AHASSEE FL				00						
IALL	ATTACOEE FL	U2UU I			83						
					84	City			85	Zip Code	
								<u> FĻ</u>	<u> </u>		
11. Pursuant t	to the provisions	of Sections 607.0502	and 607.1508, Florida St Florida, Such change w	atutes, the a	bove Lbv 1	-named of the corpo	corporation submits this statement for the purporation's board of directors. I hereby accept the	se of c appoin	:hangın tment a	g its regis is register	terea ed
agent. I ar	m familiar with a	d accept the obligation	ns of, Section 607.0505,	Florida Stat	utes.		oration's board of directors. I hereby accept the	_			
SIGNATURE	4	S KL	1				4-54-46	₹			
•	Signature, typed or p	nted name of registered agent a			Agen	t signature re	equired when reinstating) D/	ATE			
12.	V	OEE)CERS AND		13.			ADDITIONS/CHANGES TO OFFICE	RS AND	Cha		N 12 Addition
TITLE	CD		☐ DELETE	1.1 TI	TLE				∐ Cria	ilge 🗀	Abuilion
NAME	SHERIFF, W	E		1.2 N	AME						
STREET ADDRESS		ood place, ste 40	02	138	TREET	ADDRESS					
CITY-\$T-ZIP	BRENTWOOD) TN			TY-ST	-ZIP					A 1 100
TITLE	P		☐ DELETE	2.1 TI	TLE				Cha	nge ∐	Addition
NAME	HEROLD, FRA	ank l		2.2 N	AME						
STREET ADDRESS	111 WESTWO	OOD PLACE, STE 40	02	2.3 S	TREET	ADDRESS					
CITY-ST-ZIP	BRENTWOOD) TN		2.40	ITY-S	T-ZIP					
TITLE	٧	<u> </u>	☐ DELETE	3.1 TI	TLE				☐ Cha	nge 🗀	Addition
NAME	KAESTNER, I	4 T		3.2 N	AME						
STREET ADDRESS		OOD PLACE, STE 4	02	3.3 S	TREET	ADDRESS					
CITY-ST-ZIP	BRENTWOOD			3.4. C	ITY-S	T-ZiP					
TITLE	VST		☐ DELETE	. 4.1 ∏	TLE				Cha	nge 🗀	Addition
NAME	HICKS, GEOF	RGE T		4. 2 N	AME	1					
STREET ADDRESS		OOD PLACE, STE 4	02	4.3 S	TREET	ADDRESS					
CITY-ST-ZIP	BRENTWOOD			4.4 C	TY-ST	-ZIP					
TITLE	٧		☐ DELETE				-		☐ Cha	nge 🗀	Addition
NAME	MONEY, JAM	IES T		5.2 N	AME						
STREET ADDRESS		OOD PLACE, STE 4	02	5.3 S	TREET	ADDRESS					
CITY-ST-ZIP	BRENTWOOD	· · · - ·		5.4 C	ITY-ST	1-ZIP					
TITLE	V	7 174	☐ DELETE						☐ Cha	nge 🔲	Addition
NAME I	DOWNS, TOM	A G		6.2 N	AME					_	
1		00d Place, Ste 4	റ ാ			ADDRESS					
STREET ADDRESS	III MESIM	•	J.C.		ITV. ST	ŀ					

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 one an attachment with an applicase, with all other like empowered.

SIGNATURE:

OFFICER OR DIRECTOR