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Apr 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J86790

(9)

1. Corporation Name

E.S. GATLIN ENTERPRISES, INC.

Principal Place of Business

HCR 76 BOX 51
COALMONT TN 37313

Mailing Address

HCR 76 BOX 51
COALMONT TN 37313-9607

3. Date Incorporated or Qualified
08/04/1987

3a. Date of Last Report
04/02/1996

4. FEI Number

NOT APPLICABLE

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21 PO Box 124

Suite, Apt. #, etc.

22 City & State

23 Coalmont, TN

24 Zip 25 Country

29 37313 30 Grundy

9. Name and Address of Current Registered Agent

HARRIS, LEIGH
2227 PHILLIPI ST
SARASOTA FL 34231

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 P ☐ DELETE
NAME DELOZIER, JIM
STREET ADDRESS HCR 76 BOX 51 N/A
CITY- ST- ZIP COALMONT TN 37313

TITLE V ☐ DELETE
NAME GATLIN, ROBERTA
STREET ADDRESS P.O. BOX 776 N/A
CITY- ST- ZIP WHITWELL TN

TITLE D ☐ DELETE
NAME HARRIS, MICKEY
STREET ADDRESS 11501 W. FAIRMONT AVE.
CITY- ST- ZIP CHATTANOOGA TN 37405

TITLE S ☐ DELETE
NAME DELOZIER, MELBA
STREET ADDRESS HCR 76, BOX 51 N/A
CITY- ST- ZIP COALMONT TN

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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 on an attachment with an address.

SIGNATURE:

Jim DeLozier Jim DeLozier

4/11/97

Date

Daytime Phone #

CR2E034 (9/96)