2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

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Entity Name: SWAFFORD & HAYS SETTLEMENT SERVICES, INC.

Current Principal Place of Business:

9041 EXECUTIVE PARK DRIVE
SUITE 400
KNOXVILLE, TN 37923

New Principal Place of Business:

Current Mailing Address:

9041 EXECUTIVE PARK DRIVE
SUITE 400
KNOXVILLE, TN 37923

New Mailing Address:

FEI Number: 69-3684309 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, MICHAEL
5598 GRANDE LAGOON DRIVE
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: EVP ( ) Delete
Name: SWAFFORD, JAMES W
Address: 727 CARRIE DRIVE
City-St-Zip: CROSSVILLE, TN 38572

Title: PCOB ( ) Delete
Name: SWAFFORD, GREGORY A
Address: 10277 LYNN CHASE LN
City-St-Zip: KNOXVILLE, TN 37922

Title: VP ( ) Delete
Name: SWAFFORD, JAMES W II
Address: 11725 AUTUMN LANE
City-St-Zip: KNOXVILLE, TN 37922

Title: S ( ) Delete
Name: TAMPOR, DAYNA A
Address: 2312 SETTLERS RIDGE
City-St-Zip: KNOXVILLE, TN 37923

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PCOB (X) Change ( ) Addition
Name: SWAFFORD, GREGORY A
Address: 9530 HICKORY KNOLL
City-St-Zip: KNOXVILLE, TN 37931

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: TAMPAS, DAYNA A
Address: 2312 SETTLERS RIDGE
City-St-Zip: KNOXVILLE, TN 37923

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES W. SWAFFORD VP 01/07/2004

Electronic Signature of Signing Officer or Director — Date