

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000036888 1. Entity Name ROSS BRYAN ASSOCIATES, INC.	
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Principal Place of Business 1025 16TH AVE. S. 400 NASHVILLE, TN 37064	Mailing Address 1025 16TH AVE. S. 400 NASHVILLE, TN 37064
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DO NOT WRITE IN THIS SPACE



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 62-0790652	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEMS
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMAS, CLARK H 1025 16TH AVE. S. SUITE 400 NASHVILLE, TN 37212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITHEY, JAMES L 1025 15TH AVE. S. SUITE 400 NASHVILLE, TN 37212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MCDOUGLE, EDWIN A 307 APPOMATTAX BRENTWOOD, TN 37027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YARBROUGH, DONALD E 1025 16TH AVE. S. SUITE 400 NASHVILLE, TN 37212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNNING, RAYMOND M 1025 16TH AVE. S. SUITE 400 NASHVILLE, TN 37212
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SURFACE, ELIZABETH O 1025 16TH AVE S. SUITE 400 NASHVILLE, TN 37212

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01/19/06-80061-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Thomas H. Clark 1/17/06 615-229-1360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #