

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

FILED  
May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90123 024 \*\*\*150.00

DOCUMENT # P23914

1. Corporation Name

THE POTOMAC GROUP, INC.

Principal Place of Business

1283 MUEFREESBORO RD  
NASHVILLE TN 37217  
US

Mailing Address

P O BOX 290037  
NASHVILLE TN 37229  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1989

4. FEI Number

62-1249087

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 owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 CFOV ☐ DELETE

NAME BACON, DAVID F JR  
STREET ADDRESS 101 GROVE LANE  
CITY-ST-ZIP FRANKLIN TN 37064

TITLE CEOP ☒ DELETE

NAME STUMB, THOMAS S.  
STREET ADDRESS 208 HILLWOOD DRIVE  
CITY-ST-ZIP NASHVILLE TN 37205

TITLE EVPM ☒ DELETE

NAME STURGEON, JON  
STREET ADDRESS 203 JULIA COURT  
CITY-ST-ZIP FRANKLIN TN 37064

TITLE SVP ☒ DELETE

NAME BINGHAM, RHONDA M  
STREET ADDRESS 4712 HAZELWOOD CIRCLE  
CITY-ST-ZIP NASHVILLE TN 37220

TITLE COO ☒ DELETE

NAME FADLER, JEFFREY A  
STREET ADDRESS 581 CROFTON PARK LANE  
CITY-ST-ZIP FRANKLIN TN 37069

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

CFO/V/S

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

CEO/P/C

☐ Change

☒ Addition

2.2 NAME

Smith, Mark H.

2.3 STREET ADDRESS

694 Huffine Manor Circle

2.4 CITY-ST-ZIP

Franklin, TN 37064

3.1 TITLE

D

☐ Change

☒ Addition

3.2 NAME

Burch, John (Jack) Sr.

3.3 STREET ADDRESS

500 International Drive

3.4 CITY-ST-ZIP

Nashville, TN 37217

4.1 TITLE

D

☐ Change

☒ Addition

4.2 NAME

Howard, Samuel H.

4.3 STREET ADDRESS

3401 West End Avenue, Suite 470

4.4 CITY-ST-ZIP

Nashville, TN 37203

5.1 TITLE

D

☐ Change

☒ Addition

5.2 NAME

Eleazar, Paula

5.3 STREET ADDRESS

20 Burton Hills Blvd., Suite 100

5.4 CITY-ST-ZIP

Nashville, TN 37215

6.1 TITLE

D

☐ Change

☒ Addition

6.2 NAME

Rolfe, Robert

6.3 STREET ADDRESS

330 Commerce Street

6.4 CITY-ST-ZIP

Nashville, TN 37201

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*David E. Bacon, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/99 (615) 843-2500

CR2E034 (11/98)