

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P29326 (6)

1. Corporation Name

TRANSCOR AMERICA, INC.

Principal Place of Business

1510 FORT NEGLEY BLVD  
NASHVILLE TN 37203  
US

Mailing Address

1510 FORT NEGLEY BLVD  
NASHVILLE TN 37203  
US



|                                |                     |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21                             | 26                  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |
| 22                             | 27                  |
| City & State                   | City & State        |
| 23                             | 28                  |
| Zip                            | Zip                 |
| 24                             | 29                  |
| Country                        | Country             |
| 25                             | 30                  |

|   |  |
|---|--|
| 3. Date Incorporated or Qualified   | 3a. Date of Last Report                                  |
| 05/09/1990  | 06/21/1995   |
| 4. FEI Number   | Applied For  |
| 62-1428259  | Not Applicable   |
| 5. Certificate of Status Desired  | \$8.75 Additional Fee Required                           |
| <input type="checkbox"/>  |  |
| 6. Election Campaign Financing Trust Fund Contribution                                  | \$5.00 May Be Added to Fees                              |
| <input type="checkbox"/>  |  |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | <input type="checkbox"/> Yes <input type="checkbox"/> No |

9. Name and Address of Current Registered Agent

SATO, STUART WADE  
225 N. BURNETT RD  
COCOA FL 33922

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 |                        | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                      |
|----------------------------|------------------------|---|----------------------|
| TITLE                      | P                      | 1.1 TITLE   | P                    |
| NAME                       | MAY, JACK              | 1.2 NAME  | John G. Zierdt Jr.   |
| STREET ADDRESS             | 1510 FORT NEGLEY BLVD  | 1.3 STREET ADDRESS                                    | 1510 Ft. Negley Blvd |
| CITY - ST - ZIP            | NASHVILLE TN           | 1.4 CITY - ST - ZIP                                   | Nashville TN 37203   |
| TITLE                      | VP                     | 2.1 TITLE   |                      |
| NAME                       | SATO, STUART WADE      | 2.2 NAME  |                      |
| STREET ADDRESS             | 225 NORTH BURNETT ROAD | 2.3 STREET ADDRESS                                    |                      |
| CITY - ST - ZIP            | COCOA FL               | 2.4 CITY - ST - ZIP                                   |                      |
| TITLE                      | TS                     | 3.1 TITLE   | TS                   |
| NAME                       | LOVENTHAL, TOM         | 3.2 NAME  | Darrell Massengale   |
| STREET ADDRESS             | 1510 FORT NEGLEY BLVD  | 3.3 STREET ADDRESS                                    | 1510 Ft. Negley Blvd |
| CITY - ST - ZIP            | NASHVILLE TN           | 3.4 CITY - ST - ZIP                                   | Nashville TN 37203   |
| TITLE                      |                        | 4.1 TITLE   |                      |
| NAME                       |                        | 4.2 NAME  |                      |
| STREET ADDRESS             |                        | 4.3 STREET ADDRESS                                    |                      |
| CITY - ST - ZIP            |                        | 4.4 CITY - ST - ZIP                                   |                      |
| TITLE                      |                        | 5.1 TITLE   |                      |
| NAME                       |                        | 5.2 NAME  |                      |
| STREET ADDRESS             |                        | 5.3 STREET ADDRESS                                    |                      |
| CITY - ST - ZIP            |                        | 5.4 CITY - ST - ZIP                                   |                      |
| TITLE                      |                        | 6.1 TITLE   |                      |
| NAME                       |                        | 6.2 NAME  |                      |
| STREET ADDRESS             |                        | 6.3 STREET ADDRESS                                    |                      |
| CITY - ST - ZIP            |                        | 6.4 CITY - ST - ZIP                                   |                      |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: John G. Zierdt Jr. 4/26/96 615-251-7008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)