

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 05, 1999 8:00 am
Secretary of State

08-05-1999 90011 040 ***550.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32619

1. Corporation Name

KIRKLAND'S OF THE MALL OF THE AVENUES, JACKSONVILLE, FL, INC.

Principal Place of Business

PO BOX 7222
JACKSON TN 38308-222
US

Mailing Address

PO BOX 7222
JACKSON TN 38308-222
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1991

4. FEI Number

62-1436108

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. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

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 ☐ DELETE
NAME **PD KIRKLAND, CARL**
STREET ADDRESS **1069 COUNTRY CLUB RD**
CITY-ST-ZIP **JACKSON TN**

TITLE ☐ DELETE
NAME **SDV ALDERSON, ROBERT**
STREET ADDRESS **26 WHITFIELD COVE**
CITY-ST-ZIP **JACKSON TN**

TITLE ☐ DELETE
NAME **V PUGH, LOWELL**
STREET ADDRESS **805 N PARKWAY**
CITY-ST-ZIP **JACKSON TN**

TITLE ☐ DELETE
NAME **T SCOGGINS, CONNIE**
STREET ADDRESS **805 N PARKWAY**
CITY-ST-ZIP **JACKSON 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 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:

Lowell Pugh
Lowell Pugh, Secretary

7-21-99

901-668-2444

CR2E034 (5/99)

KIRKLAND'S, INC.

805 N. PARKWAY
P.O. BOX 7222
JACKSON, TENNESSEE 38308-7222
(901) 668-2444

P32619
601717-90011-40

FAX:
ADMIN/LEASING (901) 664-9345
PURCHASING (901) 668-5071
ACCTS. PAYABLE (901) 664-4480
SALES AUDIT
INVENTORY CONTROL

OFFICERS:

Chairman/CEO:

Carl Kirkland
805 North Parkway
Jackson, TN 38305

President/COO:

Robert Alderson
805 North Parkway
Jackson, TN 38305

Chief Financial Officer:

Reynolds Faulkner
805 North Parkway
Jackson, TN 38305

Asst. Vice President/Secretary:

Lowell Pugh
805 North Parkway
Jackson, TN 38305

Treasurer:

Connie Scoggins
805 North Parkway
Jackson, TN 38305

DIRECTORS:

ALDERSON, ROBERT
Kirkland's, Inc.
805 North Parkway
Jackson, TN 38305

MCGRATH, ALEXANDER
Capital Resource Partners
85 Merrimac Street, Suite 200
Boston, MA 02114

KIRKLAND, CARL
Kirkland's, Inc.
805 North Parkway
Jackson, TN 38305

MUSSAFER, DAVID
Advent International Corporation
101 Federal Street
Boston, MA 02110

ORR, R. WILSON, III
SSM Corporation
845 Crossover Lane, Suite 140
Memphis, TN 38117

OSWALD, JOHN P.
CT Capital International, Inc.
575 5th Ave., 40th Floor
New York, NY 10017

FAULKER, REYNOLDS C.
Kirkland's, Inc.
805 North Parkway
Jackson, TN 38305