

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # P36202 (0)

1. Corporation Name

T-C THREADS, INC.



Principal Place of Business

P.O. BOX 751
CHATTANOOGA TN 37401

Mailing Address

P.O. BOX 751
CHATTANOOGA TN 37401

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

10/29/1991

3a. Date of Last Report

04/27/1995

4. FCI Number

62-1475734

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 has liability for intangible tax under s. 199.032,
Florida Statutes.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 607.0503, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	FRIERSON, DANIEL K.	
STREET ADDRESS	111 EAST AND WEST ROAD	
CITY-STATE-ZIP	LOOKOUT MOUNTAIN TN	
TITLE	P	☐ DELETE
NAME	HARMON, GARY A.	
STREET ADDRESS	5809 N. SHORE DR.	
CITY-STATE-ZIP	HIXSON TN	
TITLE	T	☐ DELETE
NAME	LASATER, D. EUGENE	
STREET ADDRESS	7516 ROYAL HARBOUR CIR.	
CITY-STATE-ZIP	OOLETEWAH TN	
TITLE	S	☐ DELETE
NAME	KLEIN, STARR T.	
STREET ADDRESS	217 ARROW DRIVE	
CITY-STATE-ZIP	SIGNAL MOUNTAIN TN	
TITLE	S	☐ DELETE
NAME	YOUNG, GEOFFREY	
STREET ADDRESS	1100 AMERICAN NATIONAL BANK BLDG.	
CITY-STATE-ZIP	CHATTANOOGA TN	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☒ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☒ Addition
18. NAME	P
19. STREET ADDRESS	Glenn M. Grandin
20. CITY-STATE-ZIP	1074 Constitution Dr.
21. CITY-STATE-ZIP	Chattanooga, TN 37405

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 119.073(3)(a), 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 a member or a 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 change is, or on an attachment with an address.

SIGNATURE: *Gary A. Harmon* **Gary A. Harmon 3-27-96 (423)698-2501**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED - PLEASE

CR2E034 (12/95)