

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/15/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$275)

PROFIT CORPORATION ANNUAL REPORT



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

1995 6-30-95 B-7626-C

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JUN 30 PM 9:17

DOCUMENT # **P37069** (2)

1. Corporation Name
FERGUSON HARBOUR, INCORPORATED

Principal Place of Business Making Address
340 ROCKLAND ROAD HENDERSONVILLE TN 37075
340 ROCKLAND ROAD HENDERSONVILLE TN 37075

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/07/1992** 3a. Date of Last Report **02/24/1994**
 4. FEI Number **62-1028718** Agreed Fee Not Applicable
 5. Certificate of Status Desired **XXC** \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 7. This corporation has liability for interest tax under s. 198 (1)(f) Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH 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

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]* (Signature of former registered agent with the applicable date) *[Signature]* (Signature of new registered agent with the applicable date)

12. OFFICERS AND DIRECTORS		13. ADDITONS/CHANGES TO OFFICERS AND DIRECTORS BY 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DCP BAILEY, KEITH F. 340 ROCKLAND RD. HENDERSONVILLE TN	1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Action
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VP HUNT, G. RON 340 ROCKLAND RD. HENDERSONVILLE TN	21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY, ST, ZIP	XXC Change <input type="checkbox"/> Action
TITLE NAME STREET ADDRESS CITY, ST, ZIP	S BENNETT, DEBBIE E. 340 ROCKLAND RD. HENDERSONVILLE TN	31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY, ST, ZIP	XXC Change <input type="checkbox"/> Action
TITLE NAME STREET ADDRESS CITY, ST, ZIP	T BAILEY, KEITH F. 340 ROCKLAND ROAD HENDERSONVILLE TN	41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Action
TITLE NAME STREET ADDRESS CITY, ST, ZIP		51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY, ST, ZIP	<input type="checkbox"/> Change XXC Action
TITLE NAME STREET ADDRESS CITY, ST, ZIP		61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Action
TITLE NAME STREET ADDRESS CITY, ST, ZIP		71. TITLE 72. NAME 73. STREET ADDRESS 74. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Action

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that I am not liable for the information stated in Section 110.07(h)(4), Florida Statutes. I further certify that the information included in this annual report or the amended annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the officer or trustee responsible to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears in the s. 10 or (b)(3)(c) of the annual report filed with an address.

SIGNATURE: *[Signature]* **6/15/95** **(615)822-3295**
 SIGNATURE AND TITLE OR PRINTED NAME OF FORMER OFFICER OR DIRECTOR

CR2E034 (3/95)