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

PROFIT CORPORATION ANNUAL REPORT



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

1996

| DOCUMENT # P38918 (9) 1. Corporation Name | | | | | | |
|--|--|-------------------------------------|---|---|---|--|
| • | F ALABAMA, INC. | | | | | |
| | | | | | | |
| Principal Place of Business Mailing Address | | | | | I LONG ONDAL ORBITA CHOMI DAONA SHOMI ORBITA NDON | |
| 155 FRANKLIN RO 155 FRANKLIN ROAD | | | | | | |
| STE 401 SUITE 401, LEGAL DEPT. BRENTWOOD TN 37027 BRENTWOOD TN 37027 | | | | | | |
| US | | US | | 3. Date Incorporated or Qualified 05/21/1992 | 3a. Date of Last Report 05/01/1995 | |
| 2. Principal Plac | e of Business ntinental Place | 2a. Mailing Address 103 Continer | ntal Place | 4. FEI Number 62-1491803 | Applied For Not Applicable | |
| Suite, Apt. #, | | Suite, Apt. #, etc. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <u> </u> | _ \$8.75 Additional | |
| 22 | | 27 c/o Legal De | ept. | 5. Certificate of Status Desired | Fee Required | |
| City & State | and TN | City & State 28 Brentwood, 1 | ГΝ | Election Campaign Financing Trust Fund Contribution | S5.00 May Be Added to Fees | |
| | OOD, TN Country | | Country | 8. This corporation has liability for | | |
| ^{Zip} 37027 | 25 USA | ²⁹ 37027 | ¬ | Florida Statutes | [XX No | |
| | 9. Name and Address of Current | Registered Agent | 81 Name | 10. Name and Address of New F | legistered Agent | |
| 0.7.000 | DODATION OVETEM | | | | | |
| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD | | | 82 Street | Address (P.O. Box Number is Not Acceptable) | | |
| PLANTATION FL 33324 | | | 83 | | | |
| | | | 84 City | | 85 Zip Code | |
| | | | | | FL 89 210 Code | |
| or registere | d agent, or both, in the State of Florida | a. Such change was authorized t | ne above harned c by the corporation's | orporation submits this statement for the pu s board of directors. I hereby accept the app | ointment as registered agent. I am | |
| | , and accept the obligations of Section | n 607.0505, Florida Statutes. | | | | |
| 7,200 | | | <u> </u> | required when reinstating) | DATE | |
| 12. | OFFICERS AND | DIRECTORS | 13. | ADDITIONS/CHANGES TO OFF | Change Addition | |
| TITLE NAME | DALTON, JAMES E., JR. | Drive | 1.2 NAME | 103 Continental Place | E (100 E) 100 100 100 100 100 100 100 100 100 10 | |
| STREET ADDRESS | 155 FRANKLIN ROAD, SUITE 401 | | 1.3 STREET ADDRESS | 103 Continental Place | | |
| CITY - ST- ZIP | BRENTWOOD TN | | 1.4 CITY - ST- ZIP | | | |
| TITLE | VTD | ★ DEFE LE | 2 1 TITLE | | Cnange Addition | |
| NAME | YEAGER, ROBERT A. | ·• | 2 2 NAME | | | |
| STREET ADDRESS | 155 FRANKLIN RD., SUITE 40 BRENTWOOD TN | il | 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP | | | |
| CITY-S1-ZIP TITLE | VS | DELETE | 3 1 TIFLE | | ☑ Change ☐ Addition | |
| NAME | BATTS, CHRISTY F. | | | 100 0- 140 1-7 03 | •• | |
| STREET ADDRESS | 155 FRANKLIN RD., SUITE 40 |)1 | 33 STREET ADDRESS | 103 Continental Place | | |
| CITY-ST-ZIP | BRENTWOOD TN | The person | 3.4 CITY-ST-7IP | | X Change ☐ Addition | |
| TITLE | V DICHADDOON DOLAND D | ☐ DELETE | 4. 1 TITLE | | 2 , _ | |
| NAME execut annuaces | RICHARDSON, ROLAND P. 155 FRANKLIN RD, SUITE 40 | 1 | 4.2 NAME 4.3 STREET ADDRESS | 103 Continental Place | | |
| STREET ADDRESS CITY-ST-ZIP | BRENTWOOD TN | • | 4.3 STREET ADDRESS | | | |
| TIFLE | AS | ☐ DELETE | 5. 1 TITLE | | Change Addition | |
| NAME | JENKINS, GAYLE | | 5.2 NAME | | | |
| STREET ADDRESS | 155 FRANKLIN RD, SUITE 40 | 1 | 5.3 STREET ADDRESS | 103 Continental Place | | |
| CITY-S1-ZIP | BRENTWOOD TN | F) or cir | 5.4 CITY - ST - ZIP | | X Change Addition | |
| TITLE | PD | ☐ DELETE | 6 1 TITLE | | M cuande | |
| NAME CONCULATIONS | WILLIAMS, S. F JR 155 FRANKLIN RD., SUITE 40 | 11 | 6.2 NAME 6.3 STREET ADDRESS | 103 Continetnal Place | | |
| STREET ADDRESS | BRENTWOOD TN |) i | 64 CITY-ST-ZIP | 103 Continethal Flace | | |
| CITY-ST-ZIP | DISCHITTOOD IN | | ■ 04 CH1 - 31 - 4H | alfertantha according stated in Coation 110 | 07(3Vk) Florida Statutos I further | |

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: / Gayle Jenkins 4/12/96 615/371-7979

CR2E034 (12/95)