

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Aug 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000037947 (6)

1. Corporation Name
YUCATAN HOLDING COMPANY

Principal Place of Business

269 CUSICK ROAD
SUITE C-2
ALCOA TN 37701

Mailing Address

269 CUSICK ROAD
SUITE C-2
ALCOA TN 37701-3127



3. Date Incorporated or Qualified 05/19/1994
3a. Date of Last Report 08/30/1996

2. Principal Place of Business
21 8870 Cedar Springs Lane
Suite, Apt. #, etc. Suite 5

22 Suite 5

23 Knoxville TN

24 37923 25 Knox

26 8870 Cedar Springs Lane
Suite, Apt. #, etc. Suite 5

27 Suite 5

28 Knoxville TN

29 37923 30 Knox

4. FEI Number 62-1569341
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

9. Name and Address of Current Registered Agent

SOUTH FLORIDA REGISTERED AGENTS INC.
200 E. LAS OLAS BLVD. STE. 1900
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL

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	D	<input type="checkbox"/> DELETE
NAME	CHESNUTT, ELLA B	
STREET ADDRESS	269 CUSICK ROAD, SUITE C-2	
CITY-ST-ZIP	ALCOA TN 37701	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DORROUGH, JAYME	
STREET ADDRESS	269 CUSICK ROAD, SUITE C-2	
CITY-ST-ZIP	ALCOA TN 37701	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	8870 Cedar Springs Lane Suite 5
1.4 CITY-ST-ZIP	Knoxville TN 37923
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	8870 Cedar Springs Lane Suite 5
2.4 CITY-ST-ZIP	Knoxville TN 37923
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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:  8-19-97 423-769-2380

CR2E034 (9/96)