2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027074

Address:

City-St-Zip:

FILED Apr 15, 2004 Secretary of State

Entity Name: CCS/BAY COUNTY, INC. **Current Principal Place of Business: New Principal Place of Business:** 3401 WEST END AVE. SUITE 400 NASHVILLE, TN 37203 **New Mailing Address: Current Mailing Address:** 3401 WEST END AVE. STE 400 NASHVILLE, TN 37203 FEI Number: 62-1681129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC. 526 E. PARK AVE TALLAHASSEE, FL 32301 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CAMPBELL, NEIL H SMITH, AL J Name: Name: 3401 WEST END AVE STE 400 3401 WEST END AVE STE 400 Address: Address: City-St-Zip: NASHVILLE, TN 37203 City-St-Zip: NASHVILLE, TN 37203 Title: CD Title: () Delete () Change () Addition Name: LINDLEY, MICHAEL G Name: 3401 W END AVE STE 400 Address: Address: NASHVILLE, TN 37203 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition EDMUNDS, JOHN Name: Name: 3401 WEST END AVE STE 400 Address: Address: City-St-Zip: NASHVILLE, TN 37203 City-St-Zip: Title: () Delete Title: CFO () Change (X) Addition CAWOOD, RODNEY Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

3401 WEST END AVE STE 400

NASHVILLE, TN 37203

SIGNATURE: JOHN EDMUNDS S 04/15/2004