

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90166 022 \*\*\*158.75

0597285 AV

**DOCUMENT # P98000103945**

1. Entity Name  
**MT EQUITY CORP. II**



Principal Place of Business  
**1629 WINCHESTER ROAD  
MEMPHIS TN 38116**

Mailing Address  
**8505 WEST IRLO BRONSON  
MEMORIAL HWY  
KISSIMMEE FL 34747**



2. Principal Place of Business  
**8700 Trail Lake Drive West**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 300**

City & State  
**Memphis, TN 38125**

City & State

4. FEI Number  
**62-1763590**

Applied For  
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LOWER, BRIAN T  
8505 WEST IRLO BRONSON MEMORIAL HWY.  
KISSIMMEE FL 34747**

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete  
NAME **WILSON, SPENCE L**  
STREET ADDRESS **1629 WINCHESTER RD**  
CITY-ST-ZIP **MEMPHIS TN 38116**

TITLE ☒ Change ☐ Addition  
NAME **(See Attached)**  
STREET ADDRESS **ADDRESS Change**  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **WILSON, ROBERT A**  
STREET ADDRESS **1629 WINCHESTER RD**  
CITY-ST-ZIP **MEMPHIS TN 38116**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **WILSON, KEMMONS C JR**  
STREET ADDRESS **1629 WINCHESTER RD**  
CITY-ST-ZIP **MEMPHIS TN 38116**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **MCKEE, LEWIS K JR**  
STREET ADDRESS **1629 WINCHESTER RD**  
CITY-ST-ZIP **MEMPHIS TN 38116**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VPT** ☐ Delete  
NAME **BATT, WILLIAM R**  
STREET ADDRESS **1629 WINCHESTER RD**  
CITY-ST-ZIP **MEMPHIS TN 38116**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☐ Delete  
NAME **WALLIN, R.E.**  
STREET ADDRESS **1629 WINCHESTER RD**  
CITY-ST-ZIP **MEMPHIS TN 38116**

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: [Signature] REQUIRED** **Batt, Executive VP 4/23/03 901.346.8800**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment#  
80099679  
P98000103945

**MT EQUITY II**  
**(FEI # 59-3159649)**

8700 Trail Lake Drive West Suite 300

Memphis, TN 38125

|                       |                   |
|-----------------------|-------------------|
| Spence L Wilson       | D/P               |
| Robert A. Wilson      | D                 |
| Kemmons C. Wilson Jr. | D                 |
| Lewis K. McKee Jr.    | D                 |
| William R Batt        | Executive VP/T    |
| Jim Witherington      | D/VP              |
| R. E. Wallin          | S                 |
| Chip Crenshaw         | Asst. T/ Asst. S. |

D=Director, C=Chairman, P=President, CEO=Chief Executive Officer, CFO=Chief Financial Officer, Sr. VP=Senior Vice President, VP=Vice President, S=Secretary, T=Treasurer, Asst.=Assistant.