

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000124999

Entity Name: THOMASTON PLANT MANAGEMENT, LLC

Current Principal Place of Business:

35 EDGEWOOD AVENUE
THOMASTON, GA 30286

Current Mailing Address:

620 NORTH CAMPBELL STATION ROAD
STATION WEST STE 22
KNOXVILLE, TN 37934

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAX CO.
50 N. LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202 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

Authorized Person(s) Detail :

Title MGR
Name ROLING, DANIEL A
Address 620 NO. CAMPBELL STATION RD. STE 22
City-State-Zip: KNOXVILLE TN 37934

Title MGR
Name COVERDALE, WAYNE
Address 3212 WICKFORD DRIVE
City-State-Zip: WILIMINGTON NC 28409

Title MGR
Name MCARTHUR, WILLIAM A
Address 569 EDGEWOOD AVE SOUTH
City-State-Zip: JACKSONVILLE FL 32202

Title MGR
Name HENDRIX, CHARLES N
Address 4728 AVON LANE
City-State-Zip: JACKSONVILLE FL 32210

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: /S/ WILLIAM A. MCARTHUR

MANAGER

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date