2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2021
Secretary of State
7309750957CC

DOCUMENT# F93000002316

Entity Name: ENSAFE INC.

Current Principal Place of Business:

5724 SUMMER TREES DR.
MEMPHIS, TN 38134

Current Mailing Address:

5724 SUMMER TREES DR.
MEMPHIS, TN 38134

FEI Number: 58-1402235

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

Title	CHAIRMAN
Name	COOP, PHILLIP G
Address	5724 SUMMER TREES DR.
City-State-Zip:	MEMPHIS TN 38134

Title	DVP
Name	STODDARD, PAUL V
Address	5724 SUMMER TREES DR.
City-State-Zip:	MEMPHIS TN

Title	VP, DIRECTOR
Name	PALMER, MICHAEL D
Address	308 NORTH PETERS ROAD
City-State-Zip:	KNOXVILLE TN 37922

Title	VP, DIRECTOR
Name	ROBERSON, BRY
Address	220 ATHENS WAY SUITE 410
City-State-Zip:	NASHVILLE TN 37228

Title	DVCS
Name	WOOD, MICHAEL A
Address	5724 SUMMER TREES DR.
City-State-Zip:	MEMPHIS TN 38134

Title	DV
Name	GRAY-DAVIS, GINNY L
Address	308 NORTH PETERS ROAD
City-State-Zip:	KNOXVILLE TN 37922

Title	PRESIDENT
Name	BRADFORD, DONALD
Address	5724 SUMMER TREES DR.
City-State-Zip:	MEMPHIS TN 38134

Title	VP, DIRECTOR
Name	DERRY, BRIAN
Address	6512 DOGWOOD VIEW PKWY SUITE B
City-State-Zip:	JACKSON MS 39213

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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 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 all other like empowered.

SIGNATURE: MICHAEL WOOD SECRETARY 02/01/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	VP, DIRECTOR
Name	JAMES, JEFF
Address	4545 FULLER DRIVE
City-State-Zip:	IRVING TX 75038

Title	VP, DIRECTOR
Name	MCINTURFF, FRANK IV
Address	7775 BAYMEADOWS WAY
City-State-Zip:	JACKSONVILLE FL 32256