

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000002487

**Entity Name:** MASTERCORP OF TENNESSEE, INC.

**Current Principal Place of Business:**

3505 N. MAIN ST  
CROSSVILLE, TN 38557-5417

**Current Mailing Address:**

POST OFFICE BOX 4027  
CROSSVILLE, TN 38557-4027 US

**FEI Number:** 62-1206906

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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 PC  
Name GRINDSTAFF, D. ALAN  
Address 3505 N MAIN ST  
City-State-Zip: CROSSVILLE TN 38555-5417

Title ST  
Name GRINDSTAFF, CHARLOTTE  
Address 3505 N MAIN ST  
City-State-Zip: CROSSVILLE TN 38555-5417

Title VP  
Name SWAFFORD, KEVIN W  
Address 3505 NORTH MAIN STREET  
City-State-Zip: CROSSVILLE TN 38555

Title CONT  
Name ATKINSON, TIFFANY L  
Address 3505 N MAIN STREET  
City-State-Zip: CROSSVILLE TN 38555

*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:** TIFFANY ATKINSON

**CONTROLLER**

**01/06/2014**

Electronic Signature of Signing Officer/Director Detail

Date