

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90218 030 ***150.00

0565611

DOCUMENT # 807570

1. Entity Name
HAILEY -W. L- AND COMPANY, INC.

Principal Place of Business

**2971 KRAFT DRIVE
 NASHVILLE TN 37204**

Mailing Address

**2971 KRAFT DRIVE
 NASHVILLE TN 37204**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **62-0222930**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	PD WALLER, DAVID GEORGE	<input type="checkbox"/> Delete
STREET ADDRESS	1809 KINGSBURY DR	
CITY-ST-ZIP	NASHVILLE TN	
TITLE NAME	D STEELE, ALEX	<input type="checkbox"/> Delete
STREET ADDRESS	2971 KRAFT DR	
CITY-ST-ZIP	NASHVILLE TN	
TITLE NAME	S DAVIS, MELISSA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2971 KRAFT DR.	
CITY-ST-ZIP	NASHVILLE TN 37204	
TITLE NAME	D BLEVIUS, WILLIAM	<input type="checkbox"/> Delete
STREET ADDRESS	2971 KRAFT DR.	
CITY-ST-ZIP	NASHVILLE TN 37204	
TITLE NAME	D WOODSON, RAYMOND E	<input type="checkbox"/> Delete
STREET ADDRESS	2971 KRAFT DR	
CITY-ST-ZIP	NASHVILLE TN	
TITLE NAME	VP HOUSTON, JAMES R	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2911 KRAFT DR.	
CITY-ST-ZIP	NASHVILLE TN 37204	

TITLE NAME	Vice President Thomas A. Battan	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2971 Kraft Drive	
CITY-ST-ZIP	Nashville, TN 37204	
TITLE NAME	Secretary James P. Bryant	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2971 Kraft Drive	
CITY-ST-ZIP	Nashville, TN 37204	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

James P. Bryant Secretary **03-13-01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

615/255-3161

Daytime Phone #

CR2E034 (10/00)