


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**


**DOCUMENT # P34880**  
 1. Entity Name  
**HARDAWAY CONSTRUCTION CORP. OF TENNESSEE**



Principal Place of Business  
**615 MAIN ST.  
 NASHVILLE, TN 37206**

Mailing Address  
**PO BOX 60429  
 NASHVILLE, TN 37206-0429 US**

**DO NOT WRITE IN THIS SPACE**



04282004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>62-1263703</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATE CREATIONS ENTERPRISES, INC.  
 4521 PGA BLVD. #211  
 PALM BEACH GARDENS, FL 33418**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC HARDAWAY, L. H., JR. 615 MAIN ST. NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SLOAN, KERRY P. 615 MAIN ST. NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GROVER, BILLY D 615 MAIN STREET NASHVILLE, TN 37206
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TOOMBS, EMMETT 615 MAIN ST. NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST SLOAN, KERRY D. 615 MAIN ST. NASHVILLE, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HARDAWAY, STANLEY H 615 MAIN STREET NASHVILLE, TN 37206

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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: Stanley H. Hardaway **STANLEY H. HARDAWAY** 4-28-04 615-254-5461  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #