

1.) CORPORATION NAME:

APAC-TENNESSEE, INC.

DUE DATE: **6/30/2011**

SCC ID NO: **F0388456**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1210 HARBOR AVENUE
PO BOX 13427

CITY/ST/ZIP: MEMPHIS, TN 38113-0427

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

OFFICER DIRECTOR

NAME: NICKOLAS R HAYNES
TITLE: PRESIDENT
ADDRESS: 375 NORTHRIDGE ROAD, SUITE 350
CITY/ST/ZIP/CO: ATLANTA, GA 30350-

OFFICER DIRECTOR

NAME: CHARLIE BROWN
TITLE: TREASURER
ADDRESS: 375 NORTHRIDGE ROAD, SUITE 350
CITY/ST/ZIP/CO: ATLANTA, GA 30350-

OFFICER DIRECTOR

NAME: WILLIAM B. MILLER
TITLE: VICE PRESIDENT
ADDRESS: 375 NORTHRIDGE ROAD, SUITE 350
CITY/ST/ZIP/CO: ATLANTA, GA 30350-

OFFICER DIRECTOR

NAME: GARY P. HICKMAN
TITLE: ASST SECRETARY
ADDRESS: 375 NORTHRIDGE ROAD, SUITE 350
CITY/ST/ZIP/CO: ATLANTA, GA 30350-

OFFICER DIRECTOR

NAME: MICHAEL T. WALKER
TITLE: PRESIDENT
ADDRESS: 375 NORTHRIDGE ROAD, SUITE 350
CITY/ST/ZIP/CO: ATLANTA, GA 30350-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER B. LODGE DIRECTOR 375 NORTHRIDGE ROAD, SUITE 350 ATLANTA, GA 30350-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN W. PARSON DIRECTOR 375 NORTHRIDGE ROAD, SUITE 350 ATLANTA, GA 30350-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT K. RANDOLPH DIRECTOR 375 NORTHRIDGE ROAD, SUITE 350 ATLANTA, GA 30350-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GARY P. HICKMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GARY P. HICKMAN, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	4/29/2011 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			