

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P26530** (6)
1. Corporation Name
COMPUSA, INC.

Principal Place of Business 14951 N DALLAS PKWY DALLAS TX 75240 US	Mailing Address 14951 N DALLAS PKWY DALLAS TX 75240-7570 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/31/1989	3a. Date of Last Report 03/06/1996
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 75-2261497	Applied For ☐ Not Applicable
22. City & State		27. City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Country		29. Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

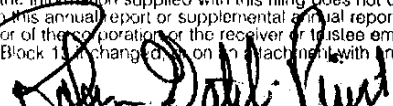
9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPC ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GATCH, PRIEST, ROBYN	1.2 NAME	
STREET ADDRESS	14951 N DALLAS PKWY	1.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	1.4 CITY-ST-ZIP	
TITLE	EVPP ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SKINNER, JAMES E	2.2 NAME	
STREET ADDRESS	14951 N DALLAS PKWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	2.4 CITY-ST-ZIP	
TITLE	EVP ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MONDRY, LARRY	3.2 NAME	
STREET ADDRESS	14951 N DALLAS PKWY	3.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	3.4 CITY-ST-ZIP	
TITLE	PCEO ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	HALPIN, JAMES	4.2 NAME	
STREET ADDRESS	14951 N DALLAS PKWY	4.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	4.4 CITY-ST-ZIP	
TITLE	EVPC ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	COMPTON, HAL	5.2 NAME	
STREET ADDRESS	14951 N DALLAS PKWY	5.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	5.4 CITY-ST-ZIP	
TITLE	DC ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BATEMAN, GILES	6.2 NAME	
STREET ADDRESS	14951 N. DALLAS PKWY	6.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13, as changed, on an attachment with an address.

SIGNATURE:  VP & Controller

4-15-97 (972) 982-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robyn Gatch-Priest

Date Daytime Phone #

CR2E034 (9/96)