

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90094 018 ***150.00

DOCUMENT # 805422

1. Entity Name
SAKS & COMPANY

Principal Place of Business

**750 LAKESHORE PKWY
TAX DEPT
BIRMINGHAM AL 35211
US**

Mailing Address

**750 LAKESHORE PKWY
TAX DEPT
BIRMINGHAM AL 35211
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-1256625

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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

Signature, typed or printed name of registered agent and title if applicable.

(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, 2002 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	PD	<input type="checkbox"/> Delete
NAME	MARTIN, BRIAN J	
STREET ADDRESS	750 LAKESHORE PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35211	
TITLE	V	<input type="checkbox"/> Delete
NAME	COLTHARP, DOUGLAS	
STREET ADDRESS	750 LAKESHORE PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35211	
TITLE	VS	<input type="checkbox"/> Delete
NAME	HANSEN, CHARLES J	
STREET ADDRESS	750 LAKESHORE PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35211	
TITLE	VT	<input type="checkbox"/> Delete
NAME	HANNOLD, SCOTT	
STREET ADDRESS	750 LAKESHORE PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35211	
TITLE	V	<input type="checkbox"/> Delete
NAME	MAYS, BRADLEY R	
STREET ADDRESS	750 LAKESHORE PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35211	
TITLE	V	<input type="checkbox"/> Delete
NAME	MARKHAM, DOUG	
STREET ADDRESS	3455 HWY 80 W	
CITY-ST-ZIP	JACKSON MS 39209	

TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brian J. Martin	
STREET ADDRESS	12 East 49th Street	
CITY-ST-ZIP	New York NY 10017	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

Signature of Bradley R. Mays
REQUIRED **Bradley R. Mays**

Date

2-6-02

Daytime Phone #

205/940-4745

CR2E034 (9/01)