

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000036462

Entity Name: UBREAKIFIX CO

Current Principal Place of Business:

4000 MILLENIA BLVD.
ORLANDO, FL 32839

FILED
Mar 29, 2024
Secretary of State
3462716612CC

Current Mailing Address:

140 11TH AVE N
ATTN: LICENSING DEPT.
NASHVILLE, TN 37203 US

FEI Number: 26-4792144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: LISA DUBOIS

03/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, DIRECTOR
Name MAGYERA, ANDREA
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title VP & SECRETARY
Name PURYEAR, GUSTAVUS IV
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title VP & ASSISTANT TREASURER
Name JENSON, JASON
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title ASST TREASURER
Name EBERSBERGER, HEATHER
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title ASST SECRETARY
Name GAUL, KRISTEN
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title DIRECTOR, PRESIDENT
Name STADTHAUS, TIMOTHY
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title CEO
Name BARBUTO, DAVID
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

Title VICE PRESIDENT AND CFO
Name PRIDDY, DANIEL
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANDREA MAGYERA

DIRECTOR

03/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP AND ASST. TREASURER
Name SANSOM, MICHAEL
Address 140 11TH AVE N
ATTN: LICENSING DEPT.
City-State-Zip: NASHVILLE TN 37203