

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 12, 2004 8:00 am**  
**Secretary of State**

08-12-2004 90001 008 \*\*\*150.00

**DOCUMENT # F00000001163**

**1. Entity Name**  
**GRIZZARD COMMUNICATIONS GROUP, INC.**



**Principal Place of Business**  
**229 PEACHTREE STREET., STE 900**  
**ATLANTA, GA 30303**

**Mailing Address**  
**229 PEACHTREE STREET., STE 900**  
**ATLANTA, GA 30303**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07292004

Chg-P

CR2E034 (10/03)

**4. FEI Number**  
**13-4103122**

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

**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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 8, 2004**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	ESTES, SLVIA D	
STREET ADDRESS	229 PEACHTREE STREET., STE 900	
CITY-ST-ZIP	ATLANTA, GA 30303	
TITLE	CEO	<input checked="" type="checkbox"/> Delete
NAME	DZVONITT, MICHAEL D	
STREET ADDRESS	229 PEACHTREE STREET., STE 900	
CITY-ST-ZIP	ATLANTA, GA 30303	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	HUBER, WILLIAM D	
STREET ADDRESS	229 PEACHTREE STREET., STE 900	
CITY-ST-ZIP	ATLANTA, GA 30303	
TITLE	P	<input type="checkbox"/> Delete
NAME	GRIZZARD, CLAUDE H JR	
STREET ADDRESS	229 PEACHTREE STREET., STE 900	
CITY-ST-ZIP	ATLANTA, GA 30303	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	MCFADDEN, JEFFERY J	
STREET ADDRESS	1002 TEXAS PARKWAY	
CITY-ST-ZIP	STAFFORD, TX 77477	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HARRISON, THOMAS L	
STREET ADDRESS	C/O OMNICON GRP, 437 MADISON AVENUE	
CITY-ST-ZIP	NEW YORK, NY 10022	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Debbie B. Layfield	
STREET ADDRESS	229 Peachtree Street	
CITY-ST-ZIP	ATLANTA, GA 30303	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barry J. Wagner	
STREET ADDRESS	C/O OMNICON Group, 437 Madison Avenue	
CITY-ST-ZIP	New York, NY 10022	
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		

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/04

Date

Daytime Phone #