

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 23, 2003 8:00 am**  
**Secretary of State**

01-23-2003 90225 032 \*\*\*150.00

UBR030001 A1

**DOCUMENT # F02000003995**

1. Entity Name  
**MATTRESS GIANT ACQUISITION CORPORATION**



Principal Place of Business  
**14665 MIDWAY ROAD, SUITE 100  
ADDISON TX 75001**

Mailing Address  
**14665 MIDWAY ROAD, SUITE 100  
ADDISON TX 75001**



CHECK HERE IF MAKING CHANGES

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 <b>75-2740752</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>SNYDER, WILLIAM</b> <b>14665 MIDWAY ROAD, SUITE 100</b> <b>ADDISON TX 75001</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>CULBERTSON, TERRY</b> <b>14665 MIDWAY ROAD, SUITE 100</b> <b>ADDISON TX 75001</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>DEKELBAUM, RON</b> <b>14665 MIDWAY ROAD, SUITE 100</b> <b>ADDISON TX 75001</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>LIST (ACTING), STEVEN</b> <b>14665 MIDWAY ROAD, SUITE 100</b> <b>ADDISON TX 75001</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>TYRRELL, JACK</b> <b>200 31ST AVENUE NORTH, SUITE 200</b> <b>NASHVILLE TN 37203</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VC</b> <b>SHERIDAN, ROBERT H II</b> <b>100 NORTH TRYON STREET, 25TH FLOOR</b> <b>CHARLOTTE NC 28255</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO</b> <b>BARRIE E. BROWN</b> <b>14665 MIDWAY ROAD, #100</b> <b>ADDISON TX 75001</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO TVP</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED *RON DEKELBAUM* **1/3/03** **972-392-2202**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **SECRETARY** Date Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

**Mattress Giant Acquisition Corporation**  
**Listing of Board of Directors**  
**As of January 1, 2003**

**FEIN 75-2740752**

F02000003995  
40007419

**Name**

**Address**

Barrie E. Brown

14665 Midway Road, #100  
Addison TX 75001

Jack Tyrrell

Richland Ventures II, L.P.  
200 31<sup>st</sup> Avenue North, Suite 200  
Nashville TN-37203

Robert H. Sheridan II

Bank of America Capital Corporation  
Bank of America Corporate Center  
100 North Tryon Street, 25<sup>th</sup> Floor  
Charlotte NC 28255

David Wilds

First Avenue Partners  
138 Second Avenue North, Suite 200  
Nashville TN 37201