

F04000001703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

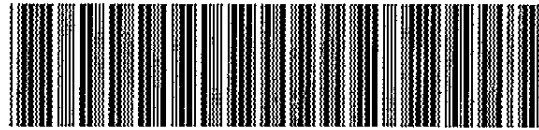
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Office

789/659/720/671
720

Office Use Only



300025782813



F04-1703

01/05/04--01043--005 **70.00

PC
of cert.

AV04-1126

701. corp.

✓
FILED
STATE
INVESTIGATIONS
DIVISION
04 MAR 30 AM 9:25

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HANDLEMAN CATEGORY MANAGEMENT COMPANY
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KAREN SCHMITZ
(Name of Person)

HANDLEMAN CATEGORY MANAGEMENT COMPANY
(Firm/Company)

500 KIRTS BLVD
(Address)

TROY, MI 48084
(City/State and Zip code)

For further information concerning this matter, please call:

KAREN SCHMITZ at 248-362-4400 X859
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 9, 2004

KAREN SCHMITZ
HANDLEMAN CATEGORY MANAGEMENT COMPANY
500 KIRTS BLVD.
TROY, MI 48084

SUBJECT: HANDLEMAN CATEGORY MANAGEMENT COMPANY
Ref. Number: W04000001126

We have received your document for HANDLEMAN CATEGORY MANAGEMENT COMPANY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

A photocopy of the certificate of existence is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 004A00001549

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. HANDLEMAN CATEGORY MANAGEMENT COMPANY
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. MICHIGAN 3. 38-3597387
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 04/02/2001 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. DECEMBER 1, 2003
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 500 KIRTS BLVD., TROY, MI 48084
(Principal office address)
- 500 KIRTS BLVD., TROY, MI 48084
(Current mailing address)
8. Management Services
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
- Name: CT CORPORATION SYSTEM
- Office Address: 1200 SOUTH PINE ISLAND ROAD
- PLANTATION, Florida 33324
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Claudia L. Saari

(Registered agent's signature)

Claudia L. Saari
Asst. Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

HANDLEMAN CATEGORY MANAGEMENT COMPANY
LIST OF OFFICERS AND DIRECTORS

NAME	TITLE	BUSINESS ADDRESS	SOCIAL SECURITY NUMBERS
STEPHEN STROME	CHAIRMAN AND CEO	500 KIRTS BLVD, TROY, MI 48084	368-44-0351
PETER J. CLINE	PRESIDENT AND COO	500 KIRTS BLVD, TROY, MI 48084	313-50-7251
THOMAS C. BRAUM, JR.	SR. VP/FINANCE, CFO	500 KIRTS BLVD, TROY, MI 48084	382-62-1513
MARK J. ALBRECHT	SENIOR VP/HR AND ORGANIZATIONAL DEVELOPMENT	500 KIRTS BLVD, TROY, MI 48084	365-68-1460
RODGER D. APPLE	VP/HUMAN RESOURCES	500 KIRTS BLVD, TROY, MI 48084	383-42-0588
DONALD M. GENOTTI	VP/CONTROLLER	500 KIRTS BLVD, TROY, MI 48084	380-72-1352
ROBERT SAUSA	VP/INFORMATION TECHNOLOGY AND CIO	500 KIRTS BLVD, TROY, MI 48084	153-42-1456
KENNETH P. KARTJE	CORPORATE SECRETARY	500 KIRTS BLVD, TROY, MI 48084	366-50-1050
DAVID HANDLEMAN	CHAIRMAN EMERITUS	500 KIRTS BLVD, TROY, MI 48084	
STEPHEN STROME	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	375-28-1698
JOHN M. BARTH	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	368-44-0351
ELIZABETH CHAPPELL	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	
RICHARD H. CUMMINGS	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	
JAMES B. NICHOLSON	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	
SANDRA E. PETERSON	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	
LLOYD E. REUSS	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	
ALAN E. SCHWARTZ	DIRECTOR	500 KIRTS BLVD, TROY, MI 48084	

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SEE ATTACHED LIST

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

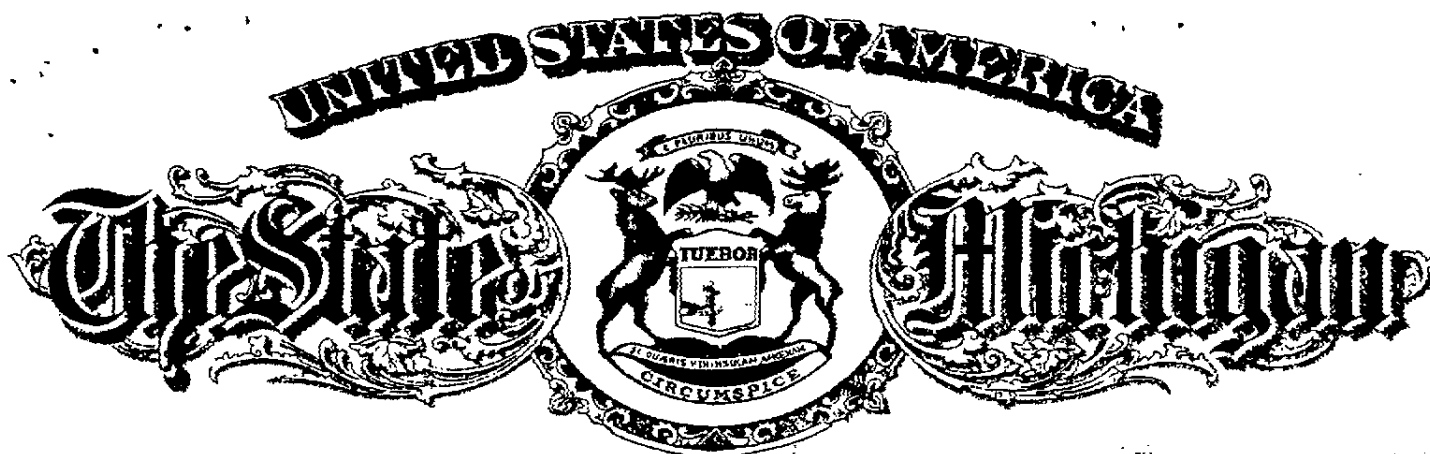
Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. THOMAS C. BRAUM, JR. Senior V.P./Finance, Treasurer & CFO
(Typed or printed name and capacity of person signing application)



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

HANDLEMAN CATEGORY MANAGEMENT COMPANY

was validly incorporated on April 2, 2001, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR 31 AM 9:26

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 3rd day of December, 2003.

Andrew S. Mitchell, Director

Bureau of Commercial Services