2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2004 08:00 AM
Secretary of State

DOCUMENT # F93000001557

1. Entity Name
FLORIDA GADZOOKS, INC.

Principal Place of Business	Mailing Address
4121 INTERNATIONAL PARKWAY CARROLLTON, TX 75007	4121 INTERNATIONAL PARKWAY CARROLLTON, TX 75007

01222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
74-2261048

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

000000166341
07/15/04-80004-022 550.00

10. OFFICERS AND DIRECTORS

TITLE	PC
NAME	SZCZEPANSKI, GERALD R
STREET ADDRESS	4121 INTERNATIONAL PARKWAY
CITY-ST-ZIP	CARROLLTON, TX 25007
TITLE	D
NAME	TITUS, LAWRENCE H III
STREET ADDRESS	4121 INTERNATIONAL PARKWAY
CITY-ST-ZIP	CARROLLTON, TX 75007
TITLE	VSF
NAME	MOTLEY, JIM
STREET ADDRESS	4121 INTERANTIONAL PARKWAY
CITY-ST-ZIP	CARROLLTON, TX 75007
TITLE	D
NAME	ROBERT NOURSE
STREET ADDRESS	550 BAILEY #700
CITY-ST-ZIP	FT. WORTH, TX
TITLE	D
NAME	MACHENS, G M
STREET ADDRESS	C/O 153 E. 53RD STREET, 23RD FLOOR
CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Jim Motley 1/26/04 (972)307-5555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Jim Motley VP/CFO/Sec