ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Aug 02, 1999 8:00 am Secretary of State

08-02-1999 90001 034 \*\*\*550.00

| <b>DOCUMENT #</b>  | F9700000412    |
|--------------------|----------------|
| 1 Corneration Name | 1 01 000000112 |

COMPACT DISCS MANAGEMENT, INC.

| Principal Place   | pal Place of Business Mailing Address              |                     |    |   |                            | 11001100 1110 10111 10111 10111 10111 10111 10111                |  |  |  |
|---|--|---------------------|----|---|----------------------------|--|--|--|--|
| 1204 SOVEREIGN ROW OKLAHOMA CITY OK 73108 US  1204 SOVEREIGN ROW OKLAHOMA CITY OK 73108 US  US  |  |                     |    |   | DO NOT WRITE IN THIS SPACE |  |  |  |  |
| 000   |  | 00                  |    |   |                            | 3. Date Incorporated or Qualifed                                 |  |  |  |
|   |  |                     |    |   |                            | 01/24/1997   |  |  |  |
| 2. Principal Pl   | ace of Business                                    | 2a. Mailing Address |    |   |                            | 4. FEI Number Applied For  |  |  |  |
| 21  | ¬ '''  |                     |    |   |                            | 73-1505825 Not Applicable  |  |  |  |
| Suite, Apt.   | #, etc.  | Suite, Apt. #, etc. |    |   |                            | 5. Certifcate of Status Desired   \$8.75 Additional Fee Required |  |  |  |
| City & State  |  | City & State        |    |   |                            | 6. Election Campaign Financing 55.00 May Be                      |  |  |  |
| 23  |  | 28                  |    |   |                            | Trust Fund Contribution Added to Fees                            |  |  |  |
| Zip   | Country  | Zip                 | C  | country   |                            | 8. This corporation owes the current year Intangible             |  |  |  |
| 24  | 25   | 29                  | 30 |   |                            | Personal Property Tax. Yes No                                    |  |  |  |
|   | 9. Name and Address of Currer                      | t Registered Agent  |    |   |                            | 10. Name and Address of New Registered Agent                     |  |  |  |
|   |  |                     |    | 81  | Name                       |  |  |  |  |
|   | CORPORATION SYSTEM                                 |                     |    | 82 Street Address (P.O. Box Number is Not Acceptable) |                            |  |  |  |  |
|   | SOUTH PINE ISLAND ROAD                             |                     |    | Street Adults (1.0. box Hallist in Hot / coopies s)   |                            |  |  |  |  |
| PLAN  | ITATION FL 33324                                   |                     |    | 83  |                            |  |  |  |  |
|   |  |                     |    | 84  | City                       | 85 Zip Code  |  |  |  |
| 1   |  |                     |    | 04  | City                       | FL   solution  |  |  |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. |  |                     |    |   |                            |  |  |  |  |
| SIGNATURE   |  |                     |    |   |                            | required when reinstating) OATE                                  |  |  |  |
| 12.   | Signature, typed or printed name of registered age | ID DIRECTORS        |    | ered Agen   | it signature r             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                |  |  |  |
| TITLE   | DCV  | DELETE              |    | 1 TITLE   |                            | Change Addition  |  |  |  |
| NAME  | GRIZZLE, JERRY W                                   |                     |    | 2 NAME  |                            | , , , ,  |  |  |  |
| STREET ADDRESS  | 722 N BROADWAY                                     |                     |    |   | ADDRESS                    | see attached   |  |  |  |
| \   | OKLAHOMA CITY OK 73102                             |                     |    | 4 CITY-S  |                            | 500 00.1000.100  |  |  |  |
| CITY-ST-ZIP   | PDC  | ☐ DELETE            |    | 1 TITLE   | 1-211                      | ☐ Change ☐ Addition  |  |  |  |
| NAME  | JOHNSON, GARY D                                    | <b>_</b>            | _  | 2 NAME  |                            |  |  |  |  |
| ·   |  |                     | _  |   | TADDRESS                   |  |  |  |  |
| STREET ADDRESS  | OKLAHOMA CITY OK 73102                             |                     |    | 4 CITY-S  |                            |  |  |  |  |
| CITY-ST-ZIP   |  | ☐ DELETE            |    | . 4 CITT-3  | 1-4IF                      | ☐ Change ☐ Addition  |  |  |  |
| 1   | ST DOVIE   |                     |    | 2 NAME  |                            | _  |  |  |  |
| NAME 1  | -MOTLEY, DOYLE E                                   |                     | 3. | .z (WWIE  |                            |  |  |  |  |

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or often attachment with an address, with all other like empowered.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

☐ DELETE

SIGNATURE:

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

722 N BROADWAY

OKLAHOMA CITY OK 73102

Change

Change

Change

☐ Addition

Addition

Addition

F97000000412 = 599272-90001-34 =

## COMPACT DISC MANAGEMENT, INC 73-1505823 OFFICER LISTING

## ATTACHMENT TO ITEM # 13

| TITLE              | NAME              | SSN         | HOME ADDRESS                                     | TELEPHONE    |
|--------------------|-------------------|-------------|--|--------------|
| Chairman/Director  | Jerry W. Grizzle  | 447-54-2042 | 1506 Squirrel Tree Place<br>Edmond, OK 73034     | 405-341-0854 |
| President/Director | Patrick Di Fazio  | 224-06-0480 | 6020 Harwich Manor<br>Oklahoma City, OK 73132    | 405-722-8081 |
| Treasurer          | Doyle Motley      | 447-60-2790 | 4016 Breckenridge Ct.<br>Norman, OK 73072        | 405-360-0972 |
| Secretary          | Mike Chionopoulos | 025-48-2605 | 3813 Pawnee<br>Edmond, OK 73013                  | 405-844-6272 |
| VP/Controller      | Carolyn S. Allen  | 444-70-2825 | 10904 Squirmy Drive<br>Newalla, OK 74857         | 405-386-6242 |
| Director           | Gary D. Johnson   | 440-72-8372 | 11208 Kingswick Drive<br>Oklahoma City, OK 73162 |              |