

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000886

1. Entity Name

AEGIS MARKETING GROUP, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90002 048 ***150.00

Principal Place of Business

ONE BURTON HILLS BLVD
SUITE 200
NASHVILLE TN 37215

Mailing Address

ONE BURTON HILLS BLVD
SUITE 200
NASHVILLE TN 37215-6104

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 62-1390310

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

NATIONAL REGISTERED AGENTS, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	CHAMBERLAIN, ROBERT	
STREET ADDRESS	ONE BURTON HILLS BLVD., STE 200	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	C	<input type="checkbox"/> Delete
NAME	HENKE, STEVE P	
STREET ADDRESS	ONE BURTON HILLS BLVD., STE 200	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	S	<input type="checkbox"/> Delete
NAME	COPELAND, LORI	
STREET ADDRESS	ONE BURTON HILLS BLVD., STE 200	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	D	<input type="checkbox"/> Delete
NAME	WUSSOW, ROLAND	
STREET ADDRESS	5241 WILLAMSBURG ROAD	
CITY-ST-ZIP	BRENTWOOD TN	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ECKENHOFF, EDWARD	
STREET ADDRESS	102 IRVING STREET, NW	
CITY-ST-ZIP	WASHINGTON DC	
TITLE	D	<input type="checkbox"/> Delete
NAME	BURTON, MICHAEL	
STREET ADDRESS	105 WESTWOOD PLACE, STE 200	
CITY-ST-ZIP	BRENTWOOD TN	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input checked="" 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		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Clyde Bright	
STREET ADDRESS	50 Music Square West, Suite 702	
CITY-ST-ZIP	Nashville, TN 37203	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barton, Michael	
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 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

Date

Daytime Phone #

3/28/00