

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004620

1. Entity Name

TARGET MEDIA PARTNERS, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90246 048 ***150.00

Principal Place of Business

2549 WEST TENNESSEE ST
TALLAHASSEE FL 32304

Mailing Address

2549 WEST TENNESSEE ST
TALLAHASSEE FL 32304

2. Principal Place of Business

3. Mailing Address

5900 WILSHIRE BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 650

City & State

LOS ANGELES, CA

Zip

Country

90036

Country

LA

4. FEI Number

95-4682394

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

~~PARACORP INCORPORATED~~
~~236 EAST 6TH AVENUE~~
~~TALLAHASSEE FL 32303~~

7. Name and Address of New Registered Agent

Name **NRAI Services, Inc.**
 Street Address (P.O. Box Number is Not Acceptable)
526 E. Park Avenue
County of Leon
 City **Tallahassee** Zip Code **32301**

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 the filer (applicable)

(NOTE: Registered Agent's 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, 2001 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	PSCD	☐ Delete
NAME	SCHIFFMACHER, MARK D	
STREET ADDRESS	5900 WILSHIRE BLVD., SUITE 650	
CITY-ST-ZIP	LOS ANGELES CA 90036	
TITLE	VTD	☐ Delete
NAME	HUMPHREVILLE, SUSAN	
STREET ADDRESS	5900 WILSHIRE BLVD., SUITE 650	
CITY-ST-ZIP	LOS ANGELES CA 90036	
TITLE	VD	☐ Delete
NAME	HUMPHREVILLE, JACK	
STREET ADDRESS	5900 WILSHIRE BLVD., SUITE 650	
CITY-ST-ZIP	LOS ANGELES CA 90036	
TITLE	V	☐ Delete
NAME	BANNISTER, BRENDA	
STREET ADDRESS	5900 WILSHIRE BLVD., SUITE 650	
CITY-ST-ZIP	LOS ANGELES CA 90036	
TITLE	D	☐ Delete
NAME	JAFFE, DAVID	
STREET ADDRESS	5900 WILSHIRE BLVD., SUITE 650	
CITY-ST-ZIP	LOS ANGELES CA 90036	
TITLE	D	☐ Delete
NAME	GRAUER, PETER	
STREET ADDRESS	5900 WILSHIRE BLVD., SUITE 650	
CITY-ST-ZIP	LOS ANGELES CA 90036	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE	D	☐ Change ☒ Addition
NAME	Jill Higgins	
STREET ADDRESS	5900 WILSHIRE BLVD, SUITE 650	
CITY-ST-ZIP	LOS ANGELES, CA 90036	
TITLE	D	☐ Change ☒ Addition
NAME	THOMAS UNTERMAN	
STREET ADDRESS	5900 WILSHIRE BLVD, SUITE 650	
CITY-ST-ZIP	Los Angeles, CA 90036	
TITLE	V	☒ Change ☐ Addition
NAME	Banister, Brenda	
STREET ADDRESS	5900 WILSHIRE BLVD, SUITE 650	
CITY-ST-ZIP	Los Angeles, CA 90036	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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 #

4/18/01 323.930.3122

CR2E034 (10/00)