

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 06, 2000 8:00 am
Secretary of State

09-06-2000 90134 013 ***550.00

DOCUMENT # F99000005566

1. Entity Name

ENTERTAINMENT PUBLICATIONS OPERATING COMPANY, IN

Principal Place of Business

2125 BUTTERFIELD ROAD
TROY MI 48064

Mailing Address

2125 BUTTERFIELD ROAD
TROY MI 48064

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

52-2198450

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **YEARY, FRANK D**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY MI 48064**

TITLE **PRESIDENT** ☐ Change ☒ Addition
NAME **ALAN RITTER**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY, MI 48064**

TITLE **SD** ☐ Delete
NAME **BARKER, FRANCIS B**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY MI 48064**

TITLE **EXECUTIVE VICE PRESIDENT** ☐ Change ☒ Addition
NAME **MARIAN ROBERGE**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY, MI 48064**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CONTROLLER** ☐ Change ☒ Addition
NAME **SANDY BERRY**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY, MI 48064**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **EXECUTIVE VICE PRESIDENT** ☐ Change ☒ Addition
NAME **KEVIN PERRY**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY, MI 48064**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SENIOR VICE PRESIDENT** ☐ Change ☒ Addition
NAME **ROBERT KILL**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY, MI 48064**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SENIOR VICE PRESIDENT** ☐ Change ☒ Addition
NAME **KARL HAWES**
STREET ADDRESS **2125 BUTTERFIELD ROAD**
CITY-ST-ZIP **TROY, MI 48064**

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: **X Sandy Berry** **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)