## 2000 UNIFORM BUSINESS REPORT (UBR)

NO TYPED OR PRINTED NAM

## FILED DOCUMENT # J31850 Aug 03, 2000 8:00 am Secretary of State THE SSI GROUP, INC. 08-03-2000 90039 018 \*\*\*150.00 Principal Place of Business Mailing Address 4721 MORRISON DR. P.O. BOX 991835 MOBILE AL 36691 MOBILE AL 36609 3. Mailing Address 2. Principal Place of Business 4721 Morrison Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Applied For City & State 4. FEI Number 59-2715634 Not Applicable <u>Mobile</u> \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (5/00) □ Delete TITLE TITLE WALLACE, CELIA A. NAME NAME STREET ADDRESS 3715 DAUPHIN ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MOBILE AL ☐ Addition Change TITLE TITLE Delete **DEBORAH STORT** NAME NAME STREET ADDRESS STREET ADDRESS 4721 MORRISON DR CITY-ST-ZIP CITY-ST-ZIP MOBILE AL 36609 ■ Delete TITLE Change ☐ Addition MARTIN SIMMONS NAME STREET ADDRESS STREET ADDRESS 400 FIRST AMERICAN CENTER CITY-ST-ZIP CITY-ST-7IP NASHVILLE TN **PCEO** ☐ Change ☐ Addition ☐ Delete NAME BOBBY E. SMITH NAME STREET ADDRESS STREET ADDRESS 4721 MORRISON DR CITY-ST-ZIP CITY-ST-ZIP MOBILE AL 36609 CF0 Change ☐ Addition ☐ Delete TITLE TITLE NAME LYONS, JAMES STREET ADDRESS STREET ADDRESS 4721 MORRISON DR CITY-ST-ZIP CITY-ST-ZIP MOBILE AL 36609 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualified 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 the 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 impowered.

VICE PRESIDENT CFO

Daytime Phone #

## Attachment # J31850 00076412



TOUP, Inc. Corporate Office: 4721 Morrison Drive • P.O. Box 991835 • Mobile, AL 36691 • 334/345-0000 • 800/880-3032 • Fax 334/345-0100

July 27, 2000

Division Of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

## To Whom It May Concern:

We received the 2000 Uniform Business Report to fill out and return as part of SSI's reporting requirements for 2000. As I was preparing the form I noticed the cover page declared this as the second notice and that the filing fee was \$550. I made a call to the Florida Dept of State to inquire about receiving a second notice when we had not previously received the original filing form. I spoke with a representative named Brian who suggested that I submit payment of \$150 and a cover letter stating that we had not received the original form. If you will check our records from last year you will see that the report was filed in a timely manner and would have been so again for 2000 had we received the original. Therefore, enclosed is the information requested on Document #J31850 along with payment of \$150. Please abate any additional fees assessed against SSI due to circumstances out of our control. If there are any questions, please feel free to contact us at the above numbers. Thank you for your cooperation in this matter.

Sincerely,

Kimberly Holland Senior Accountant

Kimberly Helland

Other offices: 19353 US Hwy. 19N, Suite 100, Clearwater, FL 33764

2010 Old Greenbrier Road, Suite M, Chesapeake, VA 23320 3687 Mt. Diablo Blvd., Suite 200, Lafayette, CA 94549