

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90045 037 ***150.00

DOCUMENT # P01000028658

1. Entity Name
GIGAFUNK RECORDS, INC.

Principal Place of Business
**507 B NORTH MARKET STREET
 BUSHNELL FL 33513**

Mailing Address
**507 B NORTH MARKET STREET
 BUSHNELL FL 33513**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3708139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MEREDITH, R.W. SR.
 507 B NORTH MARKET STREET
 BUSHNELL FL 33513**

7. Name and Address of New Registered Agent

Name **GLENN W. MEREDITH**

Street Address (P.O. Box Number is Not Acceptable)

507 B. N. MARKET ST

City

Bushnell

FL

Zip Code

33513

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 *R. Meredith Sr.*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

05/28/02
 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, 2002 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 **PD** ☒ Delete
 NAME **MEREDITH, R.W. SR.**
 STREET ADDRESS **P.O. BOX 1528 ARKET STREET**
 CITY-ST-ZIP **BUSHNELL FL 33513**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President & CEO** ☒ Change ☒ Addition
 NAME **GLENN W. MEREDITH**
 STREET ADDRESS **507 B. N. MARKET ST**
 CITY-ST-ZIP **Bushnell FL 33513**

TITLE **Secretary & Treasurer** ☐ Change ☒ Addition
 NAME **BRANDON L. MEREDITH**
 STREET ADDRESS **P.O. Box 1528 Bushnell FL 33513**
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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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:

Glenn W. Meredith
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/28/2002
 Date

1-352-703-3234
 Daytime Phone #

CR2E034 (9/01)