

2000 UNIFORM BUSINESS REPORT (UBR)

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

08-03-2000 90003 035 ***550.00

DOCUMENT # P20743

1. Entity Name ✓
WHEREHOUSE SUBSIDIARY III CO., INC.

Principal Place of Business 19701 HAMILTON AVE TORRENCE CA 90502 US	Mailing Address 19701 HAMILTON AVE TORRENCE CA 90502 US
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DO NOT WRITE IN THIS SPACE

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 58-1805603	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
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 \$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 P	ALVAREZ, ANTONIO C III 19701 HAMILTON AVE TORRENCE CA 90502 <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAINES, LARRY	NAME	
STREET ADDRESS	19701 HAMILTON AVE	STREET ADDRESS	
CITY-ST-ZIP	TORRENCE CA 90502	CITY-ST-ZIP	
TITLE	AS <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLEHER, ROBERT S	NAME	
STREET ADDRESS	19701 HAMILTON AVE	STREET ADDRESS	
CITY-ST-ZIP	TORRENCE CA 90502	CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILMORE, LYNN	NAME	
STREET ADDRESS	19701 HAMILTON AVE	STREET ADDRESS	
CITY-ST-ZIP	TORRENCE CA 90502	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALVAREZ, ANTONIO C II	NAME	
STREET ADDRESS	19701 HAMILTON AVE	STREET ADDRESS	
CITY-ST-ZIP	TORRENCE CA 90502	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLEHER, ROBERT S	NAME	
STREET ADDRESS	19701 HAMILTON AVE	STREET ADDRESS	
CITY-ST-ZIP	TORRENCE CA 90502	CITY-ST-ZIP	

see attached

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: *Charles Fuertsch* **Charles Fuertsch** 7/13/00 310-965-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

Attachment
P20743

DOC 76185

WHEREHOUSE music

WHEREHOUSE SUBSIDIARY III Co., INC.

OFFICERS

<u>Name</u>	<u>Social Security #</u>	<u>Title</u>
Antonio C. Alvarez, II 19701 Hamilton Avenue Torrance, CA 90502		President
Charles M. Fuertsch 19701 Hamilton Avenue Torrance, CA 90502	382-44-6166	Senior Vice President, Treasurer
Paul Strauss 19701 Hamilton Avenue Torrance, CA 90502	572-88-7021	Vice President, General Counsel
Mark D. Alvarez 19701 Hamilton Avenue Torrance, CA 90502	101-64-0985	Vice President, Operations & Administration

DIRECTORS

Antonio C. Alvarez, II
19701 Hamilton Avenue
Torrance, CA 90502

Mark A Velarde
19701 Hamilton Avenue
Torrance, CA 90502

Paul Strauss
19701 Hamilton Avenue
Torrance, CA 90502