

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91861 001 ***600.00

DOCUMENT # P29657

1. Entity Name
SERVICE MERCHANDISE COMPANY, INC.



Principal Place of Business
7100 SERVICE MERCHANDISE DR
P O BOX 24600
NASHVILLE TN 37202

Mailing Address
7100 SERVICE MERCHANDISE DR
P O BOX 24600
NASHVILLE TN 37202

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 **62-0816060**

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **CUSANO, SAM**
STREET ADDRESS **7100 SERVICE MDSE DR**
CITY-ST-ZIP **BRENTWOOD TN 37027**

TITLE **President** ☒ Change ☐ Addition
NAME **Moore, C. Steven**
STREET ADDRESS **7100 Service Mdse Dr**
CITY-ST-ZIP **Brentwood, TN 37027**

TITLE **CFO** ☐ Delete
NAME **HOGRAFE, MIKE**
STREET ADDRESS **7100 SVC MERCHANDISE DR**
CITY-ST-ZIP **BRENTWOOD TN 37027**

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

TITLE **S** ☒ Delete
NAME **HEAVRIN, JEFF**
STREET ADDRESS **7100 SVC MERCHANDISE DR**
CITY-ST-ZIP **BRENTWOOD TN 37027**

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

TITLE **D** ☐ Delete
NAME **CRANE, RICHARD**
STREET ADDRESS **530 WILSHIRE BLVD, SUITE 400**
CITY-ST-ZIP **SANTA MONICA CA**

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

TITLE **D** ☐ Delete
NAME **HOLT, R. MAYNARD**
STREET ADDRESS **4741 TROUSDALE DRIVE, SUITE 1**
CITY-ST-ZIP **NASHVILLE TN**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Director** ☐ Change ☒ Addition
NAME **Cusano, Sam**
STREET ADDRESS **7100 Service Mdse Dr**
CITY-ST-ZIP **Brentwood, TN 37027**

12. 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 10 or Block 11 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

4-23-03

Date

615-660-3971

Daytime Phone #

CR2E034 (10/02)