

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000000565

1. Entity Name

HER-WILL PRODUCTIONS & SPIRIT RECORDS, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90075 041 ***150.00

Principal Place of Business

Mailing Address

1705 NORTH 6TH AVENUE
PENSACOLA FL 32503

P.O. BOX 2253
PENSACOLA FL 32513-2253

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3219954

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

HARRIS, JULIAN A JR
901 NORTH REUS STREET
PENSACOLA FL 32501

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS HERRING, JOSEPH L
CITY-ST-ZIP 1705 N 6TH AVE.
PENSACOLA FL 32503

TITLE ☐ Change ☐ Addition
NAME Stock Holder / Officer
STREET ADDRESS CARRIE M HERRING
CITY-ST-ZIP 1705 N 6th Ave
PENSACOLA FL 32503

TITLE ☐ Delete
NAME D
STREET ADDRESS GRAPHENREED, LATANYA H
CITY-ST-ZIP 1710 ELMHURST ROAD
PENSACOLA FL

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

TITLE ☐ Delete
NAME D
STREET ADDRESS HERRING, JEROME
CITY-ST-ZIP 1705 N. 6TH AVE.
PENSACOLA FL 32503

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

TITLE ☐ Delete
NAME D
STREET ADDRESS HERRING, JULIUS
CITY-ST-ZIP 592 GREEN SPRING PL
WEST PALM BEACH FL 32409

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

TITLE ☐ Delete
NAME AO
STREET ADDRESS UNDERWOOD, RHONALD
CITY-ST-ZIP 1705 NORTH 6TH AVE
PENSACOLA FL

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

TITLE ☒ Delete
NAME AM
STREET ADDRESS BLOND, ERNEST
CITY-ST-ZIP 1016 NORTH ALCANIZ SCOTT
PENSACOLA FL

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joseph L. Herring CEO 01/07/00 850 453-0440