

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000093851

1. Entity Name
SAXY RECORDS, INC.

FILED
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90016 025 ***150.00

Principal Place of Business
**1287 BLUEBIRD
MARCO ISLAND FL 34145
US**

Mailing Address
**1287 BLUEBIRD
MARCO ISLAND FL 34145
US**

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 **31-1430089**

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

**SNYDER, ROBERT B
1287 BLUEBIRD
MARCO ISLAND FL 34145**

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, 2001 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	P	☐ Delete
NAME	SNYDER, ROBERT B.	
STREET ADDRESS	1287 BLUEBIRD	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	ST	☐ Delete
NAME	SNYDER, JANET	
STREET ADDRESS	1287 BLUEBIRD	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	V	☒ Delete
NAME	GIMPERT, JOHN	
STREET ADDRESS	856 TURNBRIDGE	
CITY-ST-ZIP	NAPERVILLE IL	
TITLE	CEO	☐ Delete
NAME	SNYDER, ROBERT B	
STREET ADDRESS	1287 BLUEBIRD	
CITY-ST-ZIP	MARCO ISLAND FL 34415	
TITLE	V	☐ Delete
NAME	KELLEY, ERNEST	
STREET ADDRESS	2287 LATHRUP	
CITY-ST-ZIP	DETROIT MI	
TITLE	VP	☒ Delete
NAME	ANDERSON, ERIC	
STREET ADDRESS	243 HARBOR	
CITY-ST-ZIP	PT CHARLOTTE FL 33954	

TITLE	V	☐ Change ☒ Addition
NAME	M.V. Pittman-Walker	
STREET ADDRESS	The Pittman Ranch	
CITY-ST-ZIP	Utopia TX 75884	
TITLE	V	☐ Change ☒ Addition
NAME	Jack Huguen	
STREET ADDRESS	889 Hyacinth Ct.	
CITY-ST-ZIP	Marco Island FL 34145	
TITLE	V	☐ Change ☒ Addition
NAME	Aaron Gruber	
STREET ADDRESS	1290 Bluebird Ave.	
CITY-ST-ZIP	Marco Island FL 34145	
TITLE	V	☐ Change ☒ Addition
NAME	Julie Capra	
STREET ADDRESS	7464 S. Dexter Way	
CITY-ST-ZIP	Littleton CO 80122	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: _____

Robert B. Snyder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-01 (941) 642-8570
Date Daytime Phone #

0401372

CR2E034 (10/00)