

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2001 8:00 am**  
**Secretary of State**

04-23-2001 90019 007 \*\*\*150.00

**DOCUMENT # F00000004672**

1. Entity Name

**THOROUGHbred TECHNOLOGY AND TELECOMMUNICATIONS,**

Principal Place of Business

Mailing Address

**THREE COMMERCIAL PLACE  
 NORFOLK VA 23510**

**THREE COMMERCIAL PLACE  
 NORFOLK VA 23510**

2. Principal Place of Business

**Three Commercial Place**

Suite, Apt. #, etc.

**Office of Corp Secretary**

3. Mailing Address

**Three Commercial Place**

Suite, Apt. #, etc.

**Office of Corp Secretary**

City & State  
**Norfolk, VA**

City & State  
**Norfolk, VA**

4. FEI Number **54-1962200**

Applied For

Not Applicable

Zip  
**23510-2191**

Country  
**US**

Zip  
**23510-2191**

Country  
**US**

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

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>GOODE, D R</b> <b>THREE COMMERCIAL PLACE</b> <b>NORFOLK VA 23510</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>LANE, J G</b> <b>THREE COMMERCIAL PLACE</b> <b>NORFOLK VA 23510</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MOORMAN, C W IV</b> <b>THREE COMMERCIAL PLACE</b> <b>NORFOLK VA 23510</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PRILLAMAN, L I</b> <b>THREE COMMERCIAL PLACE</b> <b>NORFOLK VA 23510</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>ROMIG, W J</b> <b>THREE COMMERCIAL PLACE</b> <b>NORFOLK VA 23510</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TOBIAS, S C</b> <b>THREE COMMERCIAL PLACE</b> <b>NORFOLK VA 23510</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Leslie S. Farless **LESLIE S. FARLESS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/01 757/629-2644

Date

Daytime Phone #

CR2E034 (10/00)

A0053394



DO NOT WRITE IN THIS SPACE

THOROUGHbred TECHNOLOGY AND TELECOMMUNICATIONS, INC.

Incorporated in Virginia on August 10, 1999

Fed ID 54-1962200

Attachment Doc# F000004672  
A0053394

Directors

David R. Goode  
J. Gary Lane  
L. I. Prillaman  
Stephen C. Tobias  
Henry C. Wolf

Officers

Charles W. Moorman  
William J. Romig  
Dezora M. Martin  
Leslie S. Farless  
Thomas W. Mahoney (1)  
Judith K. Sublett (1)

President  
Treasurer  
Corporate Secretary  
Assistant Corporate Secretary  
Assistant Treasurer  
Assistant Treasurer

Address unless otherwise indicated:

Three Commercial Place  
Norfolk, VA 23510-2191

(1) 110 Franklin Road, S.E.  
Roanoke, VA 24042

05/18/00