

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91170 019 ***550.00

DOCUMENT

1. Entity Name

NEXTTEL SOUTH CORP.

Principal Place of Business

Mailing Address

*851 TRAFALGAR CT
 STE 300-E
 MAITLAND, FL 32751 US*

*2001 EDMUND HALLEY DR.
 RESTON, VA 20191
 US*

771332

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2038968

Applied For

Not Applicable

Zip

Country

Zip

Country

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

*CORPORATION SERVICE COMPANY
 1201 HAYS ST
 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.

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!!!
 After MAY 1, 2001
 Make Check Payable

FEE IS \$150.00
 Fee will be \$550.00
 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 *PRESIDENT*
 STREET ADDRESS *SCOTT HOBANSON*
 CITY-ST-ZIP *851 TRAFALGAR CT, STE 300-E*
MAITLAND, FL 32751

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

TITLE ☐ Delete
 NAME *VP & DIRECTOR*
 STREET ADDRESS *LEN KENNEDY*
 CITY-ST-ZIP *851 TRAFALGAR CT, STE 300-E*
MAITLAND, FL 32751

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

TITLE ☐ Delete
 NAME *VP - TAX*
 STREET ADDRESS *BRIAN DAVIS*
 CITY-ST-ZIP *851 TRAFALGAR CT, STE 300-E*
MAITLAND, FL 32751

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

TITLE ☐ Delete
 NAME *SECRETARY & DIRECTOR*
 STREET ADDRESS *CHRISTIE HILL*
 CITY-ST-ZIP *851 TRAFALGAR CT, STE 300-E*
MAITLAND, FL 32751

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

TITLE ☐ Delete
 NAME *VP & TREASURER*
 STREET ADDRESS *JOHN BRITTAIN*
 CITY-ST-ZIP *851 TRAFALGAR CT, STE 300-E*
MAITLAND, FL 32751

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition
 TITLE
 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: *B. Davis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN DAVIS

Date

5/17/01 703-133-4000

Daytime Phone #

CR2E034 (11/00)