

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000002392

1. Entity Name

FLASHNET COMMUNICATIONS, INC.

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90072 040 ***150.00

Principal Place of Business

Mailing Address

1812 N. FOREST PARK BLVD.
 FORT WORTH TX 76102

1812 N. FOREST PARK BLVD.
 FORT WORTH TX 76161-0095

2. Principal Place of Business

3001 Meacham Blvd., Ste. 100

3. Mailing Address

PO Box 961095

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 100

City & State

Fort Worth, TX

City & State

Fort Worth, TX

4. FEI Number

75-2614852

Applied For

Not Applicable

Zip

76137-4615

Country

USA

Zip

76161-0095

Country

USA

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, 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

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|--|---|---|
| TITLE | CEO <input checked="" type="checkbox"/> Delete | TITLE | CEO/Pres <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | THURBURN, ALBERT L | NAME | M. Scott Leslie |
| STREET ADDRESS | 1812 N. FOREST PARK BLVD. | STREET ADDRESS | 3001 Meacham Blvd., Ste. 100 |
| CITY-ST-ZIP | FORT WORTH TX 76102 | CITY-ST-ZIP | Fort Worth, TX 76137-4615 |
| TITLE | PS <input checked="" type="checkbox"/> Delete | TITLE | COO/V-P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | LESLIE, M. SCOTT | NAME | Russell A. Wiseman |
| STREET ADDRESS | 1812 N. FOREST PARK BLVD. | STREET ADDRESS | 3001 Meacham Blvd., Ste. 100 |
| CITY-ST-ZIP | FORT WORTH TX 76102 | CITY-ST-ZIP | Fort Worth, TX 76137-4615 |
| TITLE | CFO <input checked="" type="checkbox"/> Delete | TITLE | CFO/Sec <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ELROD, GENE B | NAME | Andrew N. Jent |
| STREET ADDRESS | 1812 N. FOREST PARK BLVD. | STREET ADDRESS | 3001 Meacham Blvd., Ste. 100 |
| CITY-ST-ZIP | FORT WORTH TX 76102 | CITY-ST-ZIP | Fort Worth, TX 76137-4615 |
| TITLE | V <input checked="" type="checkbox"/> Delete | TITLE | Directors: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | MUEHLBERG, MARK | NAME | James B. Francis, Jr |
| STREET ADDRESS | 1812 N. FOREST PARK BLVD. | STREET ADDRESS | 3001 Meacham Blvd., Ste. 100 |
| CITY-ST-ZIP | FORT WORTH TX 76102 | CITY-ST-ZIP | Fort Worth, TX 76136-4615 |
| TITLE | V <input checked="" type="checkbox"/> Delete | TITLE | Dir: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | FULLER, RONNI | NAME | John B. Kleinheinz |
| STREET ADDRESS | 1812 N. FOREST PARK BLVD. | STREET ADDRESS | 3001 Meacham Blvd., Ste. 100 |
| CITY-ST-ZIP | FORT WORTH TX 76102 | CITY-ST-ZIP | Fort Worth, TX 76137-4615 |
| TITLE | V <input checked="" type="checkbox"/> Delete | TITLE | Dir <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | BELLOMY, CHRIS | NAME | Kevin A. Städtler |
| STREET ADDRESS | 1812 N. FOREST PARK BLVD. | STREET ADDRESS | 3001 Meacham Blvd., Ste. 100 |
| CITY-ST-ZIP | FORT WORTH TX 76102 | CITY-ST-ZIP | Fort Worth, TX 76137-4615 |

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:

Andrew N. Jent
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-00

Date

817-759-4823

Daytime Phone #

CR2E034 (9/99)