2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
04-12-2001 90182 040 ***150.00

DOCUMENT # H68022

1. Entity Name
ST. JOE COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
502 FIFTH STREET STE. 400 PORT ST JOE FL 32546 US	P.O. BOX 220 PORT ST JOE FL 32457 US

DO NOT WRITE IN THIS SPACE

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 59-2571958 ☐ 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
ELLMER, MARK R 502 FIFTH STREET PORT ST JOE FL 32456	Name: James B. Faison Street Address (P.O. Box Number is Not Acceptable): 502 Cecil Costin Boulevard City: Port St. Joe, FL Zip Code: 32456

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: James B. Faison Vice President, Administration 4/3/01
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	DC THOMAS, JACK H 502 CECIL G. GOSTIN, SR. BLVD. PORT SAINT JOE FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chief Executive Officer Jack H. Thomas 502 Cecil Costin Boulevard Port St. Joe, FL 32456	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV JOHNSON, EUGENE B 502 CECIL G. GOSTIN, SR. BLVD. PORT SAINT JOE FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chief Operating Officer John P. Duda 502 Cecil Costin Boulevard Port St. Joe, FL 32456	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M DUDA, JOHN P 502 CECIL G. GOSTIN, SR. BLVD. PORT SAINT JOE FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chief Financial Officer & Sec. Walter E. Leach, Jr. 502 Cecil Costin Boulevard Port St. Joe, FL 32456	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VAUGHAN, JOHN H 502 CECIL G. GOSTIN, SR. BLVD. PORT SAINT JOE FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President & Controller Lisa R. Hood 502 Cecil Costin Boulevard Port St. Joe, FL 32456	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V EDWARDS, S. WHITFIELD 502 CECIL G. GOSTIN, SR. BLVD. PORT ST. JOE FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President John H. Vaughan 502 Cecil Costin Boulevard Port St. Joe, FL 32456	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V STEIN, MICHAEL J 502 CECIL G. GOSTIN, SR. BLVD. PORT SAINT JOE FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President, Admin. James B. Faison 502 Cecil Costin Boulevard Port St. Joe, FL 32456	☒ Change ☐ Addition

CR2E034 (10/00)

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: James B. Faison 4/3/01 (850) 229-7322
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #