

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 03, 2000 8:00 am
Secretary of State

08-03-2000 90004 020 ***550.00

DOCUMENT # P18779

1. Entity Name
SYNTELLECT INC.

Principal Place of Business

~~20401 N. 219TH AVE~~
~~PHOENIX AZ 85027~~
~~US~~

Mailing Address

~~20401 N. 20TH AVE~~
~~PHOENIX AZ 85027~~
 US

2. Principal Place of Business

3. Mailing Address

16610 N. Black Canyon Highway



DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **86-0486871**

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

CT CORPORATION SYSTEM
1200 S. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 Delete
 NAME **V**
COLEMAN, SCOTT
 STREET ADDRESS **8710 N 80TH PLACE**
 CITY-ST-ZIP **SCOTTSDALE AZ**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VTS**
MILLER, NEAL
 STREET ADDRESS **120 GEORGIAN MANOR COURT**
 CITY-ST-ZIP **ALPHARETTA GA**

TITLE Change Addition
 NAME *Tony Carollo - CEO*
 STREET ADDRESS *16610 E. San Miguel*
 CITY-ST-ZIP *Paradise Valley, AZ 85253*

TITLE Delete
 NAME **V**
PAMPLIN, PETER W
 STREET ADDRESS **2390 PRINCE HOWARD**
 CITY-ST-ZIP **MARIETTA GA**

TITLE Change Addition
 NAME *Tim Vature - CFO*
 STREET ADDRESS *12003 S. Tuzigoot Ct*
 CITY-ST-ZIP *Phoenix, AZ 85044*

TITLE Delete
 NAME **C**
BRADNER, J. LAWRENCE
 STREET ADDRESS **210 HEPPLER DRIVE**
 CITY-ST-ZIP **ALPHARETTA GA**

TITLE Change Addition
 NAME *Keith Pekkala - VP*
 STREET ADDRESS *444 East Lilac Drive*
 CITY-ST-ZIP *Tempe, AZ 85281*

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 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: *Keith Pekkala* **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-20-00 *602-789-2800*
Date Daytime Phone #

CR2E034 (5/00)