

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2001 8:00 am**  
**Secretary of State**

05-02-2001 90176 030 \*\*\*158.75

**DOCUMENT # F00000001447**

1. Entity Name

EDGE CONNECTIONS, INC.

Principal Place of Business

Mailing Address

C0057496

2. Principal Place of Business

1100 JOHNSON FERRY ROAD

3. Mailing Address

1100 JOHNSON FERRY ROAD

Suite, Apt. #, etc.

SUITE 400

Suite, Apt. #, etc.

SUITE 400

City & State

ATLANTA, GA

City & State

ATLANTA, GA

4. FEI Number

58-2504614

Applied For

Not Applicable

Zip

30342

Country

U.S.A.

Zip

30342

Country

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

ANGELL CORPORATE SERVICES, INC.  
 250 ROYAL PALM WAY  
 SUITE 300  
 PALM BEACH, FLA 33480

7. Name and Address of New Registered Agent

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 11, 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DIC JOHN G. HAYES ONE LIBERTY SQUARE BOSTON, MA 02109 ☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D/P/T JAMES F. MCKENNA 1200 ABERNATHY ROAD, SUITE 1700 ATLANTA, GA 30328 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D/S MARK E. EVANS ONE LIBERTY SQUARE BOSTON, MA 02109 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

DIC CHRISTOPHER GAFFNEY ONE LIBERTY SQUARE BOSTON, MA 02109

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

D/P/T JAMES F. MCKENNA 1100 JOHNSON FERRY ROAD, SUITE 400 ATLANTA, GA 30342

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ 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:

JAMES F. MCKENNA

4/20/01

404-459-0468

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)