## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 26, 2001 8:00 am Secretary of State DOCUMENT # F0000003136 1. Entity Name ONE MEDIA PLACE, INC. 03-26-2001 90020 034 \*\*\*150.00 Principal Place of Business Mailing Address 188 THE EMBARCADERO, 3RD FLOOR 188 THE EMBARCADERO, 3RD FLOOR SAN FRANCISCO CA 94105 SAN FRANCISCO CA 94105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 94-3282804 Not Applicable Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE ACCESS INC. Street Address (P.O. Box Number is Not Acceptable) 262 EAST SIXTH AVENUE TALLAHASSEE FL 32303 Zip Code City 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PCD TITLE Change Addition TITLE ☐ Delete MACHOVINA, JERRY NAME NAME 90 PARK AVENUE, 10TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY 10016** SVP FINDAGE La Delete Change Addition TITLE TITLE MCNENNY, PATRICK John Suffor NAME NAME 188 THE EMBARCADERO, 3RD FLOOR STREET ADDRESS STREET ADDRESS SIME CITY\_CE CITY-ST-ZIP SAN FRANCISCO CA 94105 TITLE ☐ Change Addition □ Delete ARNHEIM, RALPH L NAME NAME 135 COMMONWEALTY DRIVE, SUITE 250 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MENLO PARK CA 94025** CITY-ST-ZIP ☐ Change □ Addition TITLE ☐ Delete TITLE LAYTON, WADE NAME 90 PARK AVENUE, 10TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIE **NEW YORK NY 10016** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE REDLITZ, CHRISTOPHER NAME NAME 160 VISTA GRANDE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KENTFIELD CA 94904 CITY-ST-ZIP ☐ Addition TITLE ☐ Change ☐ Defete TITLE ZIPP. ROBERT V.W. NAME NAME 1110 BURLINGAME AVENUE, SUITE 211 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BURLINGAME CA 94010**

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 trusted 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:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John A. 5 Han January 8, 2001