

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000003910

1. Entity Name

WESTWAVE COMMUNICATIONS, INC.

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90320 008 \*\*\*150.00

Principal Place of Business

3636 N. LAUGHLIN RD., SUITE 150  
SANTA ROSA CA 95403

Mailing Address

3636 N. LAUGHLIN RD., SUITE 150  
SANTA ROSA CA 95403

2. Principal Place of Business

463 Aviation Blvd.

Suite, Apt. #, etc.

3. Mailing Address

463 Aviation Blvd.

Suite, Apt. #, etc.

City & State

Santa Rosa, CA

City & State

Santa Blvd.

Zip

95403

Country

USA

Zip

95403

Country

USA

4. FEI Number

68-0416542

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 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

TITLE	PC	<input type="checkbox"/> Delete
NAME	EHRETH, DAVID	
STREET ADDRESS	3636 N. LAUGHLIN RD., SUITE 150	
CITY-ST-ZIP	SANTA ROSA CA 95403	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BAILEY, ART	
STREET ADDRESS	3636 N. LAUGHLIN RD., SUITE 150	
CITY-ST-ZIP	SANTA ROSA CA 95403	
TITLE	VC	<input type="checkbox"/> Delete
NAME	MORGENTHAUER, GARY	
STREET ADDRESS	3636 N. LAUGHLIN RD., SUITE 150	
CITY-ST-ZIP	SANTA ROSA CA 95403	
TITLE	D	<input type="checkbox"/> Delete
NAME	KENDRICK, JOHN	
STREET ADDRESS	3636 N. LAUGHLIN RD., SUITE 150	
CITY-ST-ZIP	SANTA ROSA CA 95403	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROBERTS, JENNIFER GILL	
STREET ADDRESS	3636 N. LAUGHLIN RD., SUITE 150	
CITY-ST-ZIP	SANTA ROSA CA 95403	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	463 Aviation Blvd.	
CITY-ST-ZIP	Santa Rosa, CA 95403	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	463 Aviation Blvd.	
CITY-ST-ZIP	Santa Rosa, CA 95403	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	463 Aviation Blvd.	
CITY-ST-ZIP	Santa Rosa, CA 95403	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	463 Aviation Blvd.	
CITY-ST-ZIP	Santa Rosa, CA 95403	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	463 Aviation Blvd.	
CITY-ST-ZIP	Santa Rosa, CA 95403	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gerald montry	
STREET ADDRESS	463 Aviation Blvd.	
CITY-ST-ZIP	Santa Rosa, CA 95403	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Art Bailey 4-18-01 707-591-9378

Date

Daytime Phone #

CR2E034 (10/00)

Attachment  
D#F00000003910  
A0058793

2001 Uniform Business Report (UBR)  
Document #F00000003910

Company Name: Westwave Communications, Inc.

Section 12.

**Addition**

Title: S  
Name: James Tuthill, Esq.  
Address: 463 Aviation Blvd.  
City-St-Zip: Santa Rosa, CA 95403