

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90605 029 ***150.00

0572688

DOCUMENT # F00000004120

1. Entity Name
GEMINI NETWORKS FL, INC.

Principal Place of Business
**280 TRUMBULL STREET, 24TH FL
 HARTFORD CT 06103-3585**

Mailing Address
**280 TRUMBULL STREET, 24TH FL
 HARTFORD CT 06103-3585**

00041176



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
58-2551923

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

**NRAI SERVICES INC
 526 E. PARK AVE.
 TALLAHASSEE FL 32301**

correct ✓

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 _____ (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	PD	<input type="checkbox"/> Delete
NAME	GRIFFIN, HAYNES G	
STREET ADDRESS	280 TRUMBULL STREET, 24TH FL	
CITY-ST-ZIP	HARTFORD CT	
TITLE	V	<input type="checkbox"/> Delete
NAME	CHASE, ARNOLD L	
STREET ADDRESS	280 TRUMBULL STREET, 24TH FL	
CITY-ST-ZIP	HARTFORD CT	
TITLE	V	<input type="checkbox"/> Delete
NAME	CHASE, CHERYL A	
STREET ADDRESS	280 TRUMBULL STREET, 24TH FL	
CITY-ST-ZIP	HARTFORD CT	
TITLE	VDS	<input type="checkbox"/> Delete
NAME	ROWLSON, RICHARD C	
STREET ADDRESS	280 TRUMBULL STREET, 24TH FL	
CITY-ST-ZIP	HARTFORD CT	
TITLE	VT	<input type="checkbox"/> Delete
NAME	REDDING, JOHN P	
STREET ADDRESS	280 TRUMBULL STREET, 24TH FL	
CITY-ST-ZIP	HARTFORD CT	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 another line empowered.

SIGNATURE: *X Richard C. Rowlenson* **Richard C. Rowlenson** 02/01/2001 860-293-4281

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)