2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 08:00 AM
Secretary of State

DOCUMENT # **F00000004784**

1. Entity Name
TELE-WORKS, INC.

Principal Place of Business	Mailing Address
210 PRICES FORK ROAD BLACKBURG VA 24063	P.O. BOX 663 BLACKBURG VA 24063

2. Principal Place of Business	3. Mailing Address
210 PRICES FORK ROAD	
Suite, Apt. #, etc. SUITE C	Suite, Apt. #, etc.
City & State BLACKBURG VA	City & State
Zip / Country 24060	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-1398116
☐ Applied For
☐ Not Applicable

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
SCHOLL MICHAEL 108 RIDGELAND ROAD TALLAHASSEE FL 32312 US	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 _____ **01/29/2001**
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV CRITCHFIELD STEVEN 210 PRICES FORK ROAD BLACKBURG VA 24063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV CRITCHFIELD STEVEN 210 PRICES FORK ROAD BLACKBURG VA 24060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS CROSS BRIAN E 210 PRICES FORK ROAD BLACKBURG VA 24063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS CROSS BRIAN E 210 PRICES FORK ROAD BLACKBURG VA 24060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SCHRLLHAMMER CHRISTOPHER P 210 PRICES FORK ROAD BLACKBURG VA 24063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SCHRLLHAMMER CHRISTOPHER P 210 PRICES FORK ROAD BLACKBURG VA 24060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO NELSON JOAN C 210 PRICES FORK ROAD BLACKBURG VA 24063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO NELSON JOAN C 210 PRICES FORK ROAD BLACKBURG VA 24060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/00)

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: JOAN C NELSON CEO 01/29/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #