

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**  
 05-14-2002 90337 009 \*\*\*150.00

US13300 AI

**DOCUMENT # F00000005801**

1. Entity Name  
**360FIBER INC.**

Principal Place of Business

**12101 AIRPORT WAY  
 BROOMFIELD CO 80021  
 US**

Mailing Address

**12101 AIRPORT WAY  
 BROOMFIELD CO 80021  
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**12202 Airport Way  
 Suite, Apt. #, etc.  
 Suite 300**

3. Mailing Address

**12202 Airport Way  
 Suite, Apt. #, etc.  
 Suite 300**

City & State

**Broomfield, CO**

City & State

**Broomfield, CO**

Zip

**80021**

Country

**USA**

Zip

**80021**

Country

**USA**

4. FEI Number

**52-2126392**

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, 2002 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	CEOD LEDE, DAVID 12101 AIRPORT WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOD LEDE, CLIFFORD 12101 AIRPORT WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVDP STEVENSON, RONALD 12101 AIRPORT WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCTD OLSEN, LARRY 12101 AIRPORT WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO JOHNSON, BRIAN 12101 AIRPORT WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCEACHERN, CATHERINE 12101 AIRPORT WAY BROOMFIELD CO 80021	<input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Director Gregory Maffei 12202 Airport Way Suite 300 Broomfield, CO 80021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C.O.O. Treasurer Director Simmy Byrd 12202 Airport Way Suite 300 Broomfield, CO 80021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPIGETS Patrick Summers 12202 Airport Way Suite 300 Broomfield, CO 80021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HR Jayne Hart 12202 Airport Way Suite 300 Broomfield, CO 80021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Vanessa Withman 12202 Airport Way Suite 300 Broomfield, CO 80021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**  
**Patrick Summers** 5/6/02 303-854-5000

Date

Daytime Phone #

CR2E034 (9/01)

*Attachment # F00000005801  
657692*

**360networks (USA) inc.**

12101 Airport Way  
Broomfield, Colorado  
80021

(t) 303.854.5000  
(f) 303.854.5100  
www.360.net

May 6, 2002



Uniform Business Report  
Division of Corporations  
Attn: Ms. Marie J.  
409 East Gaines Street  
Tallahassee, FL 32399

RE: Uniform Business Report  
360fiber inc.

Dear Ms. Marie J.:

On April 29, 2002, 360fiber inc. received via US Mail its preprinted copy of Florida's Uniform Business Report, which indicated that the filing and payment were due on or before May 1, 2002, in order to avoid a substantial late filing fee. On that same day, I spoke with you regarding the impossibility of compliance on such short notice and we agreed that 360fiber inc. would file the report as soon as possible, but would not be assessed late fees due to its late receipt of the form.

Accordingly, 360fiber inc. hereby submits its 2002 Uniform Business Report, together with check number 57103 in the amount of \$150.00, made payable to the Department of State, in payment of the required filing fee.

If you have any questions regarding this submittal, please contact Charles Forst at 303-854-5210.

Sincerely,

A handwritten signature in cursive script that reads 'Penny Stanley'.

Penny Stanley  
Legal Department Administrator