## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F00000006933

IRVING, TX 75063

City-St-Zip:

Entity Name: TRINITY WIRELESS TOWERS, INC.

FILED Mar 05, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2201 W. ROYAL LANE, STE. 210 STE 150 IRVING, TX 75063			2201 W. F STE 150 IRVING, T	ROYAL LANE X 75063		
Current M	lailing Addres	ss:	New Mail	New Mailing Address:		
2201 W. ROYAL LANE, STE. 210 STE 150 IRVING, TX 75063			2201 W. ROYAL LANE STE 150 IRVING, TX 75063			
FEI Number: 75-2767275 FEI Number Applied For ( )			FEI Number Not App	FEI Number Not Applicable ( ) Certificate of		
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
1201 HAYS TALLAHAS	S STREET SSEE, FL 323					
	e named entity e of Florida.	submits this statement for the p	ourpose of changing	its registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	nic Signature of Registered Age	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PAVEK, TERRY	L LANE, STE. 210	Title: Name: Address: City-St-Zip:	PAVEK, TERF	'AL LANE, STE. 150	
Title: Name: Address: City-St-Zip:	SCHRADER, T	L LANE, STE. 210	Title: Name: Address: City-St-Zip:	SCHRADER,	'AL LANE, STE. 150	
Title: Name: Address: City-St-Zip:	ALEXANDER, I	L LANE, STE. 210	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address:	SEACH, STEVE	) Delete EN E IL LANE STE 150	Title: Name: Address:	(	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: TRACY A. SCHRADER VP 03/05/2003