## **2005 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # E0100000000



1. Entity Nam SWITCH					01-21-2005 9	90052 03	39 ***150.	.00				
Principal Place of Business Mailing Address							,					
1715 NORTH Tampa, FL 3		RE BLVD., SUITE 650	1715 NORTH WESTSHORE BLVD., SUITE 650 TAMPA, FL 33607						5000	14862		
2. Principal P	lace of Busin	ness	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			<del>.</del> .	01122005	Chg-P	CR2E	034 (10/03)		
City & State			City & State				4. FEI Number 59-364		<del> </del>		oplied For ot Applicable	
Zip	Country		Zip	Country			5. Certificate	of Status Desired		\$8.75 Add	ditional	
	6. Name	and Address of Current	Registered Agent		NI		7. Name and	Address of New F	Registered	Agent		
POLLOCK, GEORGE A JR.						Name .						
1715 NORTH WESTSHORE BLVD., SUITE 650 TAMPA, FL 33607					Street A	ddress (	P.O. Box Numb	er is Not Acceptabl	e)			
					City			·	FL	Zip Cod	e	
8. The above named entity submits this statement for the purpose of changing its register						register	ed agent or bo	th in the State of El		- 1	224 22221	
the obligat	ions of regis	tered agent.	the purpose of ordinging ne	regioter	00 0.1100 01	register	ad agent, or oo	or, we trie dizzle of the	orida, rasn	i idamiada wilili,	and accept	
SIGNATURE_	Signature, typed	or printed name of registered agent a	and title if applicable. (NOTE	E: Registere	d Agent signatu	ure required	when reinstating)		DATE	<del></del>	<del></del>	
		FEE IS \$150.00 5 Fee will be \$550.0	9. Election Campai Trust Fund Cont			<b>\$5</b> . Add	.00 May Be ed to Fees					
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AN	D DIRECTOR:	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD Delete LUBY, WILLIAM K 199 WATER STREET, 20TH FLOOR NEW YORK, NY 10038				e E Eet address -St-Zip	199 \		K. REET, 20TY FI W YORK, 100		<b>⊠</b> Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OLSEN, KEITH 1715 NORTH WESTSHORE BLVD., SUITE 650				E E ET ADDRESS -ST-ZIP	P/CE OLSI 1715	O/D EN, KEITH	ESTSHORE B		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete HIGGINS, PATRICIA L 1715 NORTH WESTSHORE BLVD., SUITE 650 TAMPA, FL 33607				E Et address -St-Zip	D LUMI 660 T	MIS, FRED FRAVIS, SU STON, TX	R. ITE 6110		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Delete MYNARD, CLAYTON 1715 NORTH WESTSHORE BLVD., SUITE 650 TAMPA, FL 33607				e E Eet address -St-Zip	V/S MYN 1715	Mard, Clayton  NARD, Clayton  NORTH WESTSHORE BLVD. #650  PA, FL 33607					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	POLLOCK, GEORGE A JR. 1715 NORTH WESTSHORE BLVD., SUITE 650 TAMPA, FL 33607				E E Et address -St-Zip	V/CF POLI 1715	FO/T  LOCK, GEORGE A. JR.  NORTH WESTSHORE BLVD.#650  PA, FL 33607					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete  KELLY, GEORGE B  660 TRAVIS, SUITE 6110  HOUSTON, TX 77002  ertify that the information supplied with this filling does not qualify for the				E Et address -st-zip	D MAT 1715 TAM	IN, ARTHUF N. WESTSI PA. FL. 336	R HORE BLVD. 1		☐ Change	Addition	
ı∠. i nereby c	ertify that th	e information supplied with	this filing does not qualify for	r the exe	mption stat	ed in Se	ction 119.07(3)(	i), Florida Statutes.	I further ce	rtify that the in	ntormation	

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

Clayton Mynard, Secretary PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(813) 207-7700

## ATTAUTIVIER

**DOCUMENT #F0100000302** 

ATTACHMENT # F0/00000302

ATTACHMENT TO 50004862

2005 FOR PROFIT CORPORATION ANNUAL REPORT FOR SWITCH & DATA FACILITIES COMPANY, INC.

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title: Name: D

EARLEY, KATHLEEN

Street Address:

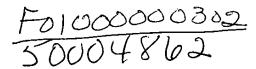
1715 N.-WESTSHORE BLVD. #650-

City-ST-Zip:

TAMPA, FL 33607

X Addition







## VIA Regular Mail

January 19, 2005

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Switch & Data Facilities Company, Inc. -

2005 For Profit Annual Report

Dear Madam or Sir:

Enclosed for filing with the Department of State is the 2005 For Profit Annual Report for Switch & Data Facilities Company, Inc. along with a check in the amount of \$150 for the filing fee.

Thank you for your assistance in this matter. Please call me if you have any questions.

Sincerely,

Switch and Data Facilities Company, Inc.

Pattie Rimas Paralegal