## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 28, 2002 8:00 am Secretary of State DOCUMENT # F01000000891 1. Entity Name 05-28-2002 91539 041 \*\*\*550.00 AIRCELL, INC. Principal Place of Business Mailing Address 1172 CENTURY DRIVE. #8-280 1172 CENTURY DRIVE. #B-280 LOUISVILLE CO 80027 LOUISVILLE CO 80027 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 75-2399562 Not Applicable Country \$8,75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (9/01) CFO TITLE Delete TITLE **PCEO** TODD LONDA NAME NAME 1172 century drive, 8-280 STINCHELFER, JIM **CR2E034** STREET ADDRESS STREET ADDRESS 1172 CENTURY DRIVE, #B-280 Louisville CITY-ST-ZIP 80027 CITY-ST-ZIP LOUISVILLE CO 80027 ~§ Addition ☐ Change TITLE ☐ Delete TITLE william Peltola NAME NAME JOCHIM, KEN 1172 century Drive, 13-280 STREET ADDRESS STREET ADDRESS 1172 CENTURY DRIVE, #B-280 80027 Louisville (0 CITY-ST-ZIP CITY-ST-ZIP LOUISVILLE CO 80027 Change TITLE" Director TITLE M Delete JB Pritzber NAME NAME HOPPE, GEOFF 1603 orrington Ave, 1070 STREET ADDRESS STREET ADDRESS 1172 CENTURY DRIVE, #B-280 CITY-ST-ZIP CITY-ST-ZIP Evenstan IL LOUISVILLE CO 80027 Addition Director ☐ Change ☐ Delete TITLE TITLE NAME Jimmy Kay NAME GORDON, BILL Tranity Urive STREET ADDRESS STREET ADDRESS 1101 17TH STREET, N.W. CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20036 Denison Director Change Addition □ Delete TITLE TITLE Seth Pierreport NAME NAME BECKER, LARRY 845 Alexander Road STREET ADDRESS STREET ADDRESS 7102 LA VISTA PLACE, SUITE 100 CITY-ST-ZIP NJ 08540 Princeton CITY-ST-ZIP LONGMONT CO 80503 Director Delete ☐ Change Addition TITLE TITLE Toe disabato NAMÉ BINGAMAN, ANNE NAME 2765 Sandhill Road STREET ADDRESS STREET ADDRESS 600 EAST LAS COLINAS BLVD., SUITE 1900 CITY-ST-ZIP Menio Park 94025 CITY-ST-ZIP IRVING TX 75039

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

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