


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90182 013 \*\*\*150.00

<b>DOCUMENT # F01000001333</b>	
1. Entity Name <b>SAGE TELECOM, INC.</b>	

Principal Place of Business <b>805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 75013-2789</b>	Mailing Address <b>805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 75013-2789</b>
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40078914



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04192006 Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent	
<b>NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331</b>	

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	
DATE _____	

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOULIHAN, DENNIS M <input checked="" type="checkbox"/> Delete 805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 750132789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO WILLIAMS, CHRISTOPHER M <input type="checkbox"/> Delete 805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 750132789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GIMNICH, JERRY L <input type="checkbox"/> Delete 805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 750132789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CLARKSON, RUSSELL L <input type="checkbox"/> Delete 805 CENTRAL EXPRESSWAY SO STE 100 ALLEN, TX 75013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KENNEDY, JAMES E JR. <input type="checkbox"/> Delete 805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 750132789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAVIS, JOE <input type="checkbox"/> Delete 805 CENTRAL EXPRESSWAY, SUITE 100 ALLEN, TX 750132789

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Terry Lewis <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 805 Central Expressway, Suite 100 Allen, TX 75013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **Christopher M. Williams** 4/26/06 214-495-4700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #