## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F01000003132

Entity Name: ARMED FORCES COMMUNICATIONS, INC.

FILED Apr 24, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 26 CASTILIAN DR SANTA BARBARA, CA 93117 **Current Mailing Address: New Mailing Address:** 26 CASTILIAN DR SANTA BARBARA, CA 93117 FEI Number: 13-3392806 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TANNER, MARK 786 HARDWOOD ST 2616 RANDY RD ORANGE PARK, FL 32065 JACKSONVILLE, FL 32216 US US 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: MARK TANNER 04/24/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition KANTER, GEOFFREY SAWYER, ANDREW Name: Name: 26 CASTILIAN DR 26 CASTILIAN DR Address: Address: SANTA BARBARA, CA 93117 City-St-Zip: SANTA BARBARA, CA 93117 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: SAWYER, ANDREW Name: ANTHONY, GREG 26 CASTILIAN DR 26 CASTILIAN DR Address: Address: SANTA BARBARA, CA 93117 SANTA BARBARA, CA 93117 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition DORAN, PATRICK Name: Name: 3350 PEACHTREE RD #1500 Address: Address: City-St-Zip: ATLANTA, GA 30326 City-St-Zip: Title: (X) Delete Title: () Change () Addition WAGNER, WILLIAM Name: Name: Address: 3350 PEACHTREE RD #1500 Address: City-St-Zip: ATLANTA, GA 30326 City-St-Zip:

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.

SIGNATURE: ANDREW T SAWYER P 04/24/2002