

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90264 046 ***158.75

05/7/02 AT

DOCUMENT # F01000004022

1. Entity Name

SCHOOLNET, INC.

Principal Place of Business
1410 BROADWAY 28TH FLOOR
NEW YORK NY 10018

Mailing Address
1410 BROADWAY 28TH FLOOR
NEW YORK NY 10018

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-4159508

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **ROBERT J. HARBUR**
 STREET ADDRESS **1410 BROADWAY 28TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY 10018**

TITLE ☐ Change ☐ Addition
 NAME **D Roszell Mack III**
 STREET ADDRESS **1500 Broadway, 14th Floor**
 CITY-ST-ZIP **New York, NY 10036**

TITLE ☐ Delete
 NAME **WC DOYLE, DENIS P**
 STREET ADDRESS **110 SUMMERFIELD RD**
 CITY-ST-ZIP **CHEVY CHASE MD 20815**

TITLE ☐ Change ☐ Addition
 NAME **D Richard Segal**
 STREET ADDRESS **707 Westchester Avenue**
 CITY-ST-ZIP **White Plains, NY 10604**

TITLE ☐ Delete
 NAME **C WURTZEL, ALAN**
 STREET ADDRESS **2134 R STREET, NW**
 CITY-ST-ZIP **WASHINGTON DC 20008**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D HARBUR, JONATHAN D**
 STREET ADDRESS **1410 BROADWAY 28TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY 10018**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D CHERNIS, MARK**
 STREET ADDRESS **2315 BROADWAY**
 CITY-ST-ZIP **NEW YORK NY 10024**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02 **212.626.7608 x 225**
 Date Daytime Phone #

CR2E034 (9/01)