## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

DOCUI  1. Entity Nam  T-NETIX,	ie	# F0200	0005041	_				FILED UG -5 AM				
Principal Plac 2155 CHNUAL CARROLLTON	T DR. SUITE		Mailing Address 2155 CHNUALT DR. SUITE 410 CARROLLTON TX 75006			SECRETARY OF STATE TALLAHASSEE. FLORIDA						
2. Principal P	lace of Busir	ness	3. Mailing Address					1111 <b>(11</b> 11) <b>11</b> 111 1	<b>HILL</b> (1911)	UIAR) 1181 IUU!		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES						
City & State	e		City & State				4. FEI Number	84-103735		No	oplied For ot Applicable	
Zip	'		Zip	<u> </u>			5. Certificate of	f Status Desired		\$8.75 Add Fee Require	ditional d	
	6. Name	and Address of Current R	egistered Agent				7. Name and A	Address of New	Registered A	Agent		
/					Name							
•	MCES, INC				Street Address (P.O. Box Number is Not Acceptable)							
526 E PARK AVENUE									<u> </u>			
TALLAHASSEE FL 32301						City 900022081723.cog 08/05/0301072009 (***550.08						
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 _	Signature, typed	or printed name of registered agent ar	d title if applicable. (NOT	E: Registere	d Agent signatu	re required	when reinstating)		DATE			
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State							I	tion Campaign Fi t Fund Contribution			May Be I to Fees	
10.		OFFICERS AND D	IRECTORS	11.			ADDITIONS/C	HANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1544 VAL	HOMAS E WOOD PARKWAY, SUITI TON TX 75006	E 102	•	-	tete 1541 CAA	<u>urallor</u>	ENER XI FARLL	5001	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1544 VAL	I, Wayne a II Wood Parkway, Suit Ton TX 75006	□ Delete E 102			Ken 154	4 Valuo	tary ler Hollo 001 PKW 1, 1X.	y., #K		<b>X</b> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		R, HANK WOOD PARKWAY, SUITI TON TX 75006	☐ Delete  E 102					,		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8100 E. 2	DANIEL M 2ND STREET NORTH KS 67226-2319	□ Delete		· ·					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AMARILLO	L, W.P. LMORE, SUITE 444 ) TX 79101-2444	□ Delete							Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 SANSOI SAN FRAI	, John H III Me Street, 39th Floo NCISCO CA 94104		CITY	ET ADDRESS ST-ZIP					Change	☐ Addition	
12. 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 10 or Block 11 if changed, or on an attachmen) with an address, with all other like empowered.												