F9300000946

05-06-2002 90146 027 ***150.00

DO NOT WRITE IN THIS SPACE

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 1. Entity Name

T-NETIX, INC.

Principal	Place	of	Busines
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67 INVERNESS DR E

#100

ENGLEWOOD CO 80112 RIL

Suite, Apt. #, etc.

notiloan<u>ae</u>r

City & State

Zip

<u> iitl</u> 102

2. Principal Place of Business

3. Mailing Address

Mailing Address

67 INVERNESS DR EAST

ENGLEWOOD CO 80112

544Yalwood Kark

1544 VOLUDOOD HARKWAY Suite, Apt. #, etc.

#100

swite 102 City & State lexas

MOO(194

PXAS Country Zip

4. FEI Number

5. Certificate of Status Desired

7. Name and Address of New Registered Agent

84-1037352

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

Street Address (P.O. Box Number is Not Acceptable)

City

(NOTE: Registered Agent signature required when reinstating)

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

(See criteria on back)

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

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

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 D Delete TITLE CR2E034 (9/01) ☐ Addition NAME MANN, JAMES L. NAME STREET ADDRESS STREET ADDRESS 67 INVERNESS DR EAST #100 CITY-ST-7IP ENGLEWOOD CO 80112 CITY-ST-ZIP TITLE ☐ Delete TITLE COB ☐ Change ☐ Addition NAME CARNEY, DANIEL M NAME STREET ADDRESS STREET ADDRESS 67 INVERNESS DR EAST #100 CITY-ST-ZIP CITY-ST-7IP ENGLEWOOD CO 80112 Secretary wayne Johnson 1544 Valussod Parkway, Suite 103 TITLE Delete **EVPO** TITLE Addition Addition NAME STIBLER, KEN NAME STREET ADDRESS 67 INVERNESS DRIVE EAST # 100 STREET ADDRESS CARROLLION, TEXAS 75006 CITY-ST-7IP ENGLEWOOD CO 80112 CITY-ST-ZIP TITLE Treasurer. Delete **EVPT** TITLE Change **★** Addition Hank Schopfer NAME SPECK, SCOTT NAME 1544 Valuood Pallway, Suite 102 STREET ADDRESS 67 INVERNESS DRIVE EAST # 100 STREET ADDRESS CITY-ST-ZIP CARROLLION, TY. 75001 CITY-ST-ZIP ENGLEWOOD CO 80112 TITLE **PCEO** ☐ Delete TITLE Change ☐ Addition NAME LARKIN, TOM NAME STREET ADDRESS STREET ADDRESS 1544 Yoursod Parkway, Suite 102 67 INVERNESS DRIVE EAST # 100 CITY-ST-ZIP ENGLEWOOD CO 80112 CITY-ST-ZIP CARROLLION, Texas Delete TITLE Change ☐ Addition NAME CREE, RICHARD E NAME STREET ADDRESS 67 INVERNESS DR. E. #100 STREET ADDRESS CITY-ST-ZIP ENGLEWOOD CO 80112 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 of trusted expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the rece changed, or on an attachme e empowered

SIGNATURE: