

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002922

1. Entity Name

NORTH STAR TELECOMM SERVICES, INC.

**FILED**  
**Jan 25, 2000 8:00 am**  
**Secretary of State**

01-25-2000 90070 032 \*\*\*150.00

Principal Place of Business

P.O. BOX 1456  
ROSEBURG OR 97470

Mailing Address

P.O. BOX 1456  
ROSEBURG OR 97470-0349

2. Principal Place of Business

1540 140TH AVE NE

Suite, Apt. #, etc.

SUITE 201

City & State

BELLEVUE WA 98005

Zip

98005

Country

US

3. Mailing Address

1540 140TH AVE NE

Suite, Apt. #, etc.

SUITE 201

City & State

BELLEVUE WA

Zip

98005

Country

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

33-0429573

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required -

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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, 2000 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

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEO  
GOODRICH, THOMAS M  
2000 INTERNATIONAL PK DR  
BIRMINGHAM AL 35243

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SMITH, CLYDE M  
2000 INTERNATIONAL PK DR  
BIRMINGHAM AL 35243

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
C  
RUBAR, WILLIAM H  
2000 INTERNATIONAL PK DR  
BIRMINGHAM AL 35243

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PAS  
COONS, G. DEAN  
1540 140 AVE NE STE 201  
BELLEVUE WA 98005

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
JOHNSON, WILLIAM G JR  
2000 INTERNATIONAL PARK DR  
BIRMINGHAM AL 35243

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
MCCARTY, JOSEPH S JR  
2000 INTERNATIONAL PK DR  
BIRMINGHAM AL 35243

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
KRIS L. HILL  
1540 140TH AVE NE, STE 201  
BELLEVUE, WA 98005

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

*Kris L Hill*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/00  
Date

425-653-2502  
Daytime Phone #