2005 FOR PROFFT CORPORATION

May 03, 2005 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # F94000005369** 05-03-2005 90068 016 ***150.00 1. Entity Name SKYTEL CORP. 40011 Principal Place of Business Mailing Address 22001 LOUDOUN COUNTY PKWY. 1133 19TH STREET N.W. ASHBURN, VA 20147 US **DEPT. 8408** WASHINGTON, DC 20036 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suita Ant # ---04122005 CR2E034 (10/03) Tax Dept 8408 Bldg C2-3 512 City & State 4. FEI Number Applied For 22001 Loudoun County Parkway Ashbum, VA 20147 64-0848625 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) **TALLAHASSEE, FL 32301-2525** City Zip Code FL 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. (市) SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PCEO TITLE ☐ Delete TITL F ☐ Change Addition Stephen C. Ferguson, Vice Pres CAPELLAS, MICHAEL NAME NAME 22001 Loudoun County Parkway STREET ADDRESS 22001 LOUDOUN COUNTY PKWY. STREET ADDRESS Ashburn, VA 20147 CITY-\$T-ZIP ASHBURN, VA 20147 CITY-ST-ZIP TITLE Delete **TITLE** Change Addition Victoria Harker, Treas. NAME HAMIL, WILLIAM NAME 22001 Loudoun County Parkway STREET ADDRESS 22001 LOUDOUN COUNTY PKWY. STREET ADDRESS Ashburn, VA 20147 CITY-ST-7IP ASHBURN, VA 20147 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ■ Addition MOONEY, STEPHEN R NAME NAME 22001 LOUDOUN COUNTY PKWY. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ASHBURN, VA 20147 CITY-ST-ZIP TITLE Defete TM F ☐ Change ☐ Addition MCGAREY, JENNIFER NAME NAME 22001 LOUDOUN COUNTY PKWY. STREET ADDRESS STREET ADDRESS CITY-ST-7IP ASHBURN, VA 20147 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME BLAKELY, ROBERT T NAME STREET ADDRESS 22001 LOUDOUN COUNTY PKWY STREET ADDRESS CITY-ST-ZIP ASHBURN, VA 20147 CITY-ST-ZIP Detete TITLE IIII F Change ☐ Addition NAME KELLY, ANASTASIA NAME STREET ADDRESS 22001 LOUDOUN COUNTY PKWY STREET ADDRESS ASHBURN, VA 20147 CITY-ST-ZIP 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 attachment with an address, with an other like empowered.

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NAME OF SIGNING OFFICER OR DIRECTOR

Stephen C. Ferguson, Vice Pres

Daytime Phone #

SIGNATURE: (2)

FILED