

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90404 003 ***150.00

DOCUMENT # F94000006342

1. Entity Name
EASTON TELECOM SERVICES INC.

Principal Place of Business

**SUMMIT II UNIT A
 3046 BRECKSVILLE ROAD
 RICHFIELD OH 44286
 US**

Mailing Address

**SUMMIT II UNIT A
 3046 BRECKSVILLE ROAD
 RICHFIELD OH 44286
 US**

BULL17030



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

JAME
 Suite, Apt. #, etc.

SAME
 Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

34-1713206

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CCEO
 MANDL, ALEX J
 8065 LEESBURG PIKE SUITE 400
 VIENNA VA 22182** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DIRECTOR, SENIOR VP, COO
 JIM CONTINENZA
 460 HERNDON PKWY
 HERNDON, VA 22170** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VS
 HARRIS, LAURENCE E
 8065 LEESBURG PIKE STE 400
 VIENNA VA 22182** ☒ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SVP
 BELL, STEVEN F
 8065 LEESBURG PIKE STE 400
 VIENNA VA 22182** ☒ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**AS
 KUPINSKY, STUART H
 8065 LEESBURG PIKE SUITE 400
 VIENNA VA 22182** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DIRECTOR, SENIOR VP, SEC.
 STUART KUPINSKY
 460 HERNDON PKWY
 HERNDON, VA 22170** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**AT
 SWEASY, BARBARA A
 8065 LEESBURG PIKE SUITE 400
 VIENNA VA 22182** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**AT
 BARBARA SWEASY
 460 HERNDON PKWY
 HERNDON, VA 22170** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**AS
 SCHLESINGER, VICTORIA A
 8065 LEESBURG PIKE SUITE 400
 VIENNA VA 22182** ☐ Delete

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

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:

HERNDON, VA 22170
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/1/02 330-659-6700

CR2E034 (9/01)