

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 08, 1999 8:00 am
Secretary of State

03-08-1999 90057 047 ***150.00

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DOCUMENT # F95000001067

1. Corporation Name

WAVEPHORE NETWORKS, INC.

Principal Place of Business

375 CHIPETA WAY
SUITE B
SALT LAKE CITY UT 84108
US

Mailing Address

375 CHIPETA WAY
SUITE B
SALT LAKE CITY UT 84108
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1995

4. FEI Number

87-0453520

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 - Additional -
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME CALDER, SCOTT E
STREET ADDRESS 375 CHIPETA WAY, SUITE B
CITY-ST-ZIP SALT LAKE CITY UT 84108

TITLE VP ☐ DELETE

NAME GARDNER, MILLER R
STREET ADDRESS 266 N. PHEASANTTRIDGE
CITY-ST-ZIP BOUNTIFUL UT 84010

TITLE D ☐ DELETE

NAME WILLIAMSON, GLENN R
STREET ADDRESS 3311 N 44TH ST.
CITY-ST-ZIP PHOENIX AZ 85018

TITLE S ☐ DELETE

NAME REICH, DOUGLAS
STREET ADDRESS 3311 N 44TH ST.
CITY-ST-ZIP PHOENIX AZ 85018

TITLE DC ☐ DELETE

NAME DEEDS, DAVID E.
STREET ADDRESS 3311 NORTH 44TH STREET
CITY-ST-ZIP PHOENIX AZ 85018

TITLE T ☐ DELETE

NAME SWENSON, KENNETH D.
STREET ADDRESS 3311 NORTH 44TH STREET
CITY-ST-ZIP PHOENIX AZ 85018

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D/C/P

T/D

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Douglas J. Reich* Douglas J. Reich

2-19-99

602-952-5500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)