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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500001454 (6)

MCCAW 900 MHZ COMMUNICATIONS, INC.

5000 CARILLON POINT

KIRKLAND WA 98033

STREET ADDRESS

CITY-ST-ZIP

Principal Place of Business Mailing Address 5000 CARILLON POINT **5000 CARILLON POINT** KIRKLAND WA 98033-7356 KIRKLAND WA 88033 3. Date Incorporated or Qualified 3a. Date of Last Report 03/27/1995 07/26/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 91-1199614 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Ζip Country 8. This corporation has liability for intangible fax under s. 199.032, Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 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_flegistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE Daniel K. Hesse HOOPER, STEVEN W. NAME 1.2 NAME 5000 carillon Point 5000 CARILLON POINT STREET ADDRESS 1.3 STREET ADDRESS KIRKLAND WA 98033 CITY-ST-Z#F 1.4 CHTY - ST - ZIP Kirkland, WM DELETE Addition TITLE 2.1 TITLE PERRY, WAYNE M. NAME 5000 Carillon Point 5000 CARILLON POINT STREET ADDRESS 2.3 STREET ADDRESS KIRKLAND WA 98033 Kirkland WA 98033 CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 THILE Change Addition THOMAS, MARK U. NAME 3.2 NAME **5000 CARILLON POINT** STREET ADDRESS 3.3 STREET ADDRESS KIRKLAND WA 98033 CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE VPAS Change Addition TITLE 4.1 TITLE MARSH, JENNIFER NAME 4. 2 NAME 5000 CARILLON POINT STREET ADDRESS 4.3 STREET ADDRESS KIRKLAND WA 98033 CITY-ST-ZIP 4.4 CITY-ST-ZIP CFOT DELETE Addition TITLE 5.1 TITLE HUFF, ROLLA P. Thompson NAME 5.2 NAME 5000 CARILLON POINT Cavillon Point STREET ADDRESS 5.3 STREET ADDRESS KIRKLAND WA 98033 CITY-ST-ZIP 5.4 CITY-\$1-ZIP Kirkland WA SVPD DELETE 6 1 TITLE Change Addition TITLE QUARTNER, ANDREW A NAME 6.2 NAME

appears in Block 12 or Block 13 if cylanged, or on an attachment portron address.

14. I do 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

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 comprission or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

CR2E034 (9/96)

FILED

Jul 31 1997 8:00am

Secretary of State