

2004 FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 OCT 25 PM 2:52

DOCUMENT # F95000001474

1. Entity Name
AUDIO FIDELITY COMMUNICATIONS CORPORATION



Principal Place of Business
3900 GASKINS RD
RICHMOND, VA 23233 US

Mailing Address
3900 GASKINS RD
RICHMOND, VA 23233 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10212004 REIN-P CR2E098 (6/04)

4. FEI Number
54-0617014

Applied For
Not Applicable

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

FOY, GRADY
3728 PHILLIPS HWY
STE 214
JACKSONVILLE, FL 32207

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST ☐ Delete
NAME WHITLOCK, JOHN D
STREET ADDRESS PO BOX 130 (N/A)
CITY-ST-ZIP MINERAL, VA 23117

TITLE ☐ Change ☐ Addition
NAME 100042165931
STREET ADDRESS 10/25/04--01086--009 **150.00
CITY-ST-ZIP

TITLE V ☒ Delete
NAME WHITLOCK, W.W.
STREET ADDRESS PO BOX 130 (N/A)
CITY-ST-ZIP MINERAL, VA 23117

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

TITLE P ☐ Delete
NAME THOMPSON, KEVIN
STREET ADDRESS 230 CLEARFIELD AVE
CITY-ST-ZIP VA BEACH, VA

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

TITLE CFO ☐ Delete
NAME HALL, DOUGLAS S
STREET ADDRESS 11304 DEEP HAVEN CT
CITY-ST-ZIP RICHMOND, VA

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V MARK BAKER
STREET ADDRESS 3900 GASKINS RD
CITY-ST-ZIP RICHMOND VA 21233

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/04 804-273-9100

Date

Daytime Phone #

10/26/04