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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F95000002825 (6) DOCUMENT #

WIRELESS PCS, INC.

FILED May 15 1998 8:00am Secretary of State

|--|--|

Principal Place	e of Business	Mailing Address			* 180/108 (118 (810) 011)	/I 8871) 6814 88141 88414 88140 14884 I	Tila Nast Arii 1881
5000 CARILLON POINT 5000 CARILLON POINT KIRKLAND WA 98033 KIRKLAND WA 98033							
						NOT WRITE IN THIS SPACE	:
					3. Date Incorporated o 06/12/1995	or Qualified	
2. Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number		Applied For
21		26			91-1683571		Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status		.75 Additional ee Required
City & State		City & State			Election Campaign I Trust Fund Contribu		5.00 May Be dded to Fees
Zip Country		Zip Country				es or has paid the current ye	
24	25	29	30		Personal Property To		
	9. Name and Address of Current	45-4-1			10. Name and Address	s of New Registered Agent	
120	ENTICE HALL CORPORATION SYS 11 HAYS STREET, STE. 105 LAHASSEE FL 32301	STEM, INC.	8	i ² Street 3	encl of acent Address (P.O. Box Member is N Corporation	de Acceptable)	nitted by
			8	4 City		FL 85	Zıp Code
office or re agent. Las SIGNATURE	to the provisions of Sections 607,0502 ogistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed tubes of registered rights.	f Florida Such ch ange was a ions of, Section 607,0505 , Flo	uthorized rida Statu	by the cor es.	poration's board of directors. I h	nereby accept the appointme	ent as registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGE	ES TO OFFICERS AND DIRE	
TITLE	8	☐ DELETE	1.1 1(1)	F	SID	⊠ Ch	nange 🔲 Addition
NAME	LANDIS, GREGORY P		1.2 NAM	É			
STREET ADDRESS	5000 CARILLON POINT		1.3 STR	ET ADDRESS			
CITY-ST-ZIP	KIRKLAND WA		1.4 CITY	· ST-ZIP			
TITLE	PD	☐ DELETE	2 1 TITL	Ē		L. Ct	nange 🔲 Addition
NAME	HESSE, DANIEL R		2.2 NAM	E			
STREET ADDRESS	5000 CARILLON POINT		2.3 STR	E1 ADDRESS			
CITY-ST-ZIP	KIRKLAND WA		2. 4 CIT	r - S1 - ZIP			
TITLE	VAS	☐ DELETE	3.1 TITL	E.		☐ Cr	nange L Addition
NAME	MARSH, JENNIFER		3.2 NAM	E			
STREET ADDRESS	5000 CARILLON POINT		3.3 STR	ET ADDRESS			
CITY-ST-ZIP	KIRKLAND WA 98033		3.4. CIT	r-ST-ZIP			
TITLE	V	DELETE	41 THIL	E	VP	⊠ Ct	nange L Addition
NAME	THOMAS, MARK U		4. 2 NA	AE			
STREET ADDRESS	5000 CARILLON POINT		4.3 STR	EFF ADDRESS			
CITY-ST-ZIP	KIRKLAND WA 98033			-ST-ZIP			
TITLE	CFOT	☐ DELETE	5 1 TITE		VPICFOITID	⊠ Ct	nange
NAME	THOMPSON, JOHN D		5.2 NAM				
STREET ADDRESS	5000 CARILLON POINT		5.3 STRI	ET ADDRESS			
CITY-ST-ZIP	KIRKLAND WA	<u>,</u>		- ST - ZIP			
TITLE	SVPD	DELETE	61 TITL	Ē		☐ Cr	nange
NAME	QUARTNER, ANDREW A		6 2 NAM	ΙE			
STREET ADDRESS	1150 CONNECTICUT AVE 4TH	FLR	6 3 S1R	ELT ADDRESS			
CITY-ST-ZIP	WASH DC		6.4 City	-ST-ZIP			

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 frusted expowered 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 altacument with an aptdress.