2004 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F95000004756

1. Entity Name



May 03, 2004 8:00 am Secretary of State 05-03-2004 91229 001 ***150.00

FILED

INTERSTATE FIBERNET, INC.									
Principal Place of Business 4092 SOUTH MEMORIAL PKWY HUNTSVILLE, AL 35802		Mailing Address 4092 SOUTH MEMORIAL PKWY HUNTSVILLE, AL 35802 US						! ! 2 	IN er i al a re i
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4272004	Chg-P	CR2E03	34 (10/03)	
City & State		City & State			FEI Numbe 58-1970				oplied For ot Applicable
Zip	Country	Zip	Country	5.	Certificate	of Status Desired		8.75 Add ee Require	ditional d
	Name and Address of Current F	Registered Agent		7.	Name and	Address of New	Registered A	gent	
•				Name					
1201 HAYS	TION SERVICE COMPANY S STREET SSEE, FL 32301-2525		Street Address			er is Not Acceptab	le)		
TALLATIA	3GEE, 1 E 02001-2020								
			City				FL	Zip Cod	e
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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	-							· ·	
FiLI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campaign Trust Fund Contrib		\$5.00 Added to	May Be Fees				
10.	OFFICERS AND I	DIRECTORS	11,			CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE	PD 1	☐ Delete	TITLE	Preside	nt.			Change	☐ Addition
NAME	WALKER, ANDREW		NAME	Andrew	MOTE	ker Drive	~	•	
STREET ADDRESS	1791 O.G. SKINNER DRIVE		STREET ADDRESS	191 O	O PINA	N A NOISS			
CITY-ST-ZIP	WEST POINT, GA 31833		CITY-ST-ZIP	WEST 1	LOWL"	GA 31833			
TITLE	VSD MULLIS, THOMAS	☐ Delete	TITLE NAME	Secretor Thomas	/A0 1.4	5	1-	Change	☐ Addition
NAME STREET ADDRESS	4092 S MEMORIAL PKWY		STREET ADDRESS	4142 S	outh A	hemorial t	KMA		
CITY-ST-ZIP	HUNTSVILLE, AL 35802		CITY-ST-ZIP	Himk	suille.	hemorial P , AL 358	02		į
TITLE	T	☐ Delete	TITLE	1101111	341.40	(., -	<u>* · </u>	☐ Change	Addition
NAME	_FREDRICKSON, IVOR		NAME :		-		=		
STREET ADDRESS	4092 S MEMORIAL PKWY		STREET ADDRESS						
CITY-ST-ZIP	HUNTSVILLE, AL 35802		CITY-\$T-ZIP						
TITLE	CEOD	☐ Delete	TITLE					Change	Addition
NAME STREET ADDRESS	WILLIAMS, LARRY 1791 O.G. SKINNER DR		NAME STREET ADDRESS						
CITY-ST-ZIP	WEST POINT, GA 31833		CITY-ST-ZIP						
TITLE	V	☐ Defete	TITLE					☐ Change	☐ Addition
NAME	PLUNKETT, SARA L	Name of State	NAME					-	
STREET ADDRESS	4092 S. MEMORIAL PARKWAY		STREET ADDRESS						
CITY-ST-ZIP	HUNTSVILLE, AL 35802		CITY-ST-ZIP			•			
TITLE	· ———	☐ Delete	TITLE					☐ Change	☐ Addition
NAME			NAME						
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP		No. of the second secon	CITY-ST-ZIP	1 0 0 0	- 110 07/01	(I) Flavide Cont	1 6 mth = 1 = 1	N. Sheek all 1]
12. I nereby	certify that the information supplied with	trus ming does not quality for t	ne exemption sta	aleu iii Sectiof	n Haul (3)	er, Fiorida Statutes	rooth: that La	ary mat the I	r or director

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR