

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # F96000001121

1. Entity Name
NATIONS BROADBAND, INC.



Principal Place of Business Mailing Address
13455 NOEL RD., #1000 13455 NOEL RD., #1000
DALLAS, TX 75240 DALLAS, TX 75240



01212005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
75-2480756 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BLAESER, JOHN
900 COVE CAY DR., #6G
CLEARWATER, FL 34620

**DO NOT WRITE
IN THIS SPACE**

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 May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution. ☐ Added to Fees

U000000218305

02/07/05-20053-018 150.00

10. OFFICERS AND DIRECTORS

TITLE PDC
NAME GREEN, ERIC
STREET ADDRESS 13455 NOEL RD #1000
CITY-ST-ZIP DALLAS, TX 75240

TITLE VSDC
NAME GREEN, ROBERT
STREET ADDRESS 13455 NOEL RD #1000
CITY-ST-ZIP DALLAS, TX 75240

TITLE TD
NAME GREEN, STEVEN
STREET ADDRESS 13455 NOEL RD #1000
CITY-ST-ZIP DALLAS, TX 75240

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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

2-3-05
Date

972-881-7851
Daytime Phone #