

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

FILED  
May 10, 2002 8:00 am  
Secretary of State

05-10-2002 90015 013 \*\*\*150.00

DOCUMENT # F96000001908

1. Entity Name

TTI NATIONAL, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

500 CLINTON CENTER DR

3. Mailing Address

1133 19TH STREET NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
DEPT 8408

DO NOT WRITE IN THIS SPACE

80093688

City & State  
CLINTON MS

City & State  
WASHINGTON DC

4. FEI Number  
64-0874463

Applied For

Not Applicable

Zip  
39056

Country  
US

Zip  
20036

Country  
US

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE  
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name  
NRAI SERVICES, INC.

Street Address (P.O. Box Number is Not Acceptable)  
526 EAST PARK AVENUE

City  
TALLAHASSEE

FL

Zip Code  
32301

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
BERNARD EBBERS  
500 CLINTON CENTER DRIVE  
CLINTON MS 39056

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VGTC  
WALTER NAGEL  
1133 19TH STREET  
WASHINGTON DC 20036

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
ST  
SCOTT SULLIVAN  
500 CLINTON CENTER DRIVE  
CLINTON MS 39056

TITLE  
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STREET ADDRESS  
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DO NOT WRITE  
IN THIS SPACE

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

WALTER NAGEL - VPGTC 04/30/02 202-736-6362

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)