

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90893 040 ***150.00

DOCUMENT # F96000002438

1. Entity Name
ILD COMMUNICATIONS, INC.

Principal Place of Business

**16200 ADDISON RD
 #100
 ADDISON TX 75001**

Mailing Address

**16200 ADDISON RD
 #100
 ADDISON TX 75001**



2. Principal Place of Business

5000 Sawgrass Village Circle

Suite, Apt. #, etc.
Suite 30

City & State
Ponte Vedra Beach, FL

Zip
32082

Country
USA

3. Mailing Address

5000 Sawgrass Village Circle

Suite, Apt. #, etc.
Suite 30

City & State
Ponte Vedra Beach, FL

Zip
32082

Country
USA

4. FEI Number

59-3375165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LLOYD, FREDERICK W
 13000 SAWGRASS VILLAGE CIRCLE #5
 PONTE VEDRA BEACH FL 32082**

7. Name and Address of New Registered Agent

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.

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) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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
PD ☐ Delete
 NAME
STOUTENBURGH, DENNIS J
 STREET ADDRESS
16200 ADDISON RD- STE 100
 CITY-ST-ZIP
ADDISON TX 75001

TITLE
AS ☒ Delete
 NAME
TREVINO, GEORGE M
 STREET ADDRESS
16200 ADDISON RD- STE 100
 CITY-ST-ZIP
ADDISON TX 75001

TITLE
VP ☐ Delete
 NAME
HALL, GREGORY E
 STREET ADDRESS
16200 ADDISON RD- STE 100
 CITY-ST-ZIP
ADDISON TX 75001

TITLE
VP ☒ Delete
 NAME
GALLAGHER, BOB
 STREET ADDRESS
16200 ADDISON RD- STE 100
 CITY-ST-ZIP
ADDISON TX 75001

TITLE
DCEO ☐ Delete
 NAME
LEWIS, MICHAEL
 STREET ADDRESS
13000 SAWGRASS VILLAGE CTR, STE 5
 CITY-ST-ZIP
PONTE VEDRA BEACH FL 32082

TITLE
☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
CFO/VP ☒ Change ☐ Addition
 NAME
H. EDWARD BROOKS
 STREET ADDRESS
5000 SAWGRASS VILLAGE CIRCLE, SUITE 30
 CITY-ST-ZIP
PONTE VEDRA BEACH, FL 32082

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

TITLE
CONTROLLER ☒ Change ☐ Addition
 NAME
MICHAEL CUMPTON
 STREET ADDRESS
5000 SAWGRASS VILLAGE CIRCLE, SUITE 30
 CITY-ST-ZIP
PONTE VEDRA BEACH, FL 32082

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

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

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02

Date

Daytime Phone #

CR2E034 (9/01)