

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

FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F97000003222 (3)

1. Corporation Name
ONDACOM WIRELESS SERVICES, INC.



| | |
|---|---|
| Principal Place of Business | Mailing Address |
| SUITE 1800 1155 PEACHTREE ST., N.E. ATLANTA GA 30309-3610 | SUITE 1800 1155 PEACHTREE ST., N.E. ATLANTA GA 30309-3610 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/19/1997

4. FEI Number
APPLIED FOR 58-2329099

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

| | | | |
|----|--------------------------------|-----|---------------------|
| 21 | 2. Principal Place of Business | 2a. | Mailing Address |
| 22 | Suite, Apt. #, etc. | 27 | Suite, Apt. #, etc. |
| 23 | City & State | 28 | City & State |
| 24 | Zip | 29 | Zip |
| 25 | Country | 30 | Country |

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

| | | |
|-----------------|--|---------------------------------|
| TITLE | P | <input type="checkbox"/> DELETE |
| NAME | REYNOLDS, MICHAEL | |
| STREET ADDRESS | SUITE 400, 1100 PEACHTREE ST., NE | |
| CITY - ST - ZIP | ATLANTA GA 30309-4599 | |
| TITLE | VS | <input type="checkbox"/> DELETE |
| NAME | BROWN, JEFFREY P | |
| STREET ADDRESS | SUITE 400, 1100 PEACHTREE ST., NE | |
| CITY - ST - ZIP | ATLANTA GA 30309-4599 | |
| TITLE | TD | <input type="checkbox"/> DELETE |
| NAME | MCARTHUR, RAWDON W | |
| STREET ADDRESS | SUITE 400, 1100 PEACHTREE ST., NE | |
| CITY - ST - ZIP | ATLANTA GA 30309-4599 | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | ROPER, G K III | |
| STREET ADDRESS | SUITE 400, 1100 PEACHTREE ST., NE | |
| CITY - ST - ZIP | ATLANTA GA 30309-4599 | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|---------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | See Attachment |
| 1.4 CITY - ST - ZIP | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY - ST - ZIP | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY - ST - ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY - ST - ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY - ST - ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 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 trustee empowered 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 attachment with an address.

SIGNATURE: *Joyce Clower Irvine* **Joyce Clower Irvine** 1/15/98 (404) 249-4450

CR2E034 (10/97)

ONDACOM WIRELESS SERVICES, INC.

Attachment to Annual Reports

Directors

G. Kinsey Roper III
Suite 400, 1100 Peachtree Street
Atlanta, GA 30309

Marshall M. Criser
Suite 400, 1100 Peachtree Street
Atlanta, GA 30309

Michael Reynolds
2502 Rocky Point Drive
Tampa, Florida 33607

Luke D. Dallafior
Suite 400, 1100 Peachtree Street
Atlanta, GA 30309

Rick Kirby
Suite 200, 2502 Rocky Point Drive
Tampa, Florida 33607

Officers

Michael Reynolds, President
2502 Rocky Point Drive
Tampa, Florida 33607

Jeffrey P. Brown, Vice President, Secretary & General Counsel
Suite 400, 1100 Peachtree Street
Atlanta, GA 30309

Rawdon W. McArthur, Vice President, CFO & Treasurer
14K01, 1155 Peachtree Street
Atlanta, GA 30309

Joyce Clower Irvine, Assistant Secretary
Suite 1800, 1155 Peachtree Street
Atlanta, GA 30309