2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an addre

SIGNATURE:

with all other like empowered.

FILED DOCUMENT # F9700006340 Mar 16, 2000 8:00 am **Secretary of State** TANTIVY COMMUNICATIONS, INC. 03-16-2000 90067 027 ***150.00 Principal Place of Business Mailing Address 2200 FRONT ST 2200 FRONT ST MELBOURNE FL 32901-7389 MELBOURNE FL 32901 C0036574 US US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3430673 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Edwards & Angell GRAY, HARRIS & ROBINSON, P.A. tress (P.O. Box Number is Not Accepte Royal Palm Wa 201 E. PINE STREET, SUITE 1200 ORLANDO FL 32801 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. DATE (NOTE: Registered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PD ab) Addition ☐ Delete TITLE CARNEY, RONALD R NAME NAME 2200 FRONT ST #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MELBOURNE FL 32901 CITY-ST-7IP ☐ Addition ☐ Delete Change TITLE AMALFITANO, CARLO NAME 2200 FRONT ST #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MELBOURNE FL 32901** CITY-ST-ZIP **X** Change Addition ☐ Delete TITLE Gorsuch, Thomas E GORUSCH, THOMAS E NAME NAME 2200 FRONT ST #300 STREET ADDRESS STREET ADDRESS MELBOURNE FL 32901 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE TITLE b.R. Roberson NAME NAME 2200 Front Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Melbourne FL 32901 CITY-ST-ZIP ☐ Change , 🛛 Addition ☐ Delete TITLE Lisa M.Kolb NAME NAME 2200 Front Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Melbourne, FL 3290. CITY-ST-ZIP Change Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 | 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