

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001116

1. Entity Name

CHAPMAN COMMUNICATION SYSTEMS, INC.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90093 001 \*\*\*158.75

Principal Place of Business

Mailing Address

5200 CAHABA RIVER RD.  
 BIRMINGHAM AL 35243

5200 CAHABA RIVER RD.  
 BIRMINGHAM AL 35243-2319

2. Principal Place of Business

1801 CHARLOTTE DRIVE

3. Mailing Address

P.O. Box 361260

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BIRMINGHAM, AL

City & State

BIRMINGHAM, AL

4. FEI Number

63-1131928

Applied For

Not Applicable

Zip

35226

Country

USA

Zip

35236

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCNEES, JAMES M  
 5039 TIMUQUANA RD., #3  
 JACKSONVILLE FL 32210

Name

DRUGAN, WILLIAM P.

Street Address (P.O. Box Number is Not Acceptable)

2809 W. 15TH STREET, #204

City

PANAMA CITY

FL

Zip Code

32401

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

William P. Drugan, Division Manager

04/24/00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDC  
 NAME CHAPMAN, JACK ☐ Delete  
 STREET ADDRESS 1801 CHARLOTTE DR.  
 CITY-ST-ZIP BIRMINGHAM AL 35226

TITLE D  
 NAME CHAPMAN, ALVIN ☐ Change ☒ Addition  
 STREET ADDRESS 950 MICHIGAN AVENUE  
 CITY-ST-ZIP COLUMBUS, OH 43215

TITLE SD  
 NAME CHAPMAN, BRENDA ☐ Delete  
 STREET ADDRESS 1801 CHARLOTTE DR.  
 CITY-ST-ZIP BIRMINGHAM AL 35226

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

TITLE VDC  
 NAME MORSON, JESSE M ☐ Delete  
 STREET ADDRESS 1710 SHADES VIEW LANE  
 CITY-ST-ZIP BIRMINGHAM AL 35216

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

TITLE D  
 NAME UPUTON, DAVE ☒ Delete  
 STREET ADDRESS 3025 N. WOODRIDGE  
 CITY-ST-ZIP BIRMINGHAM AL 35223

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

TITLE D  
 NAME DUBNICKA, JIM ☒ Delete  
 STREET ADDRESS 1002 MORNING SUN DR.  
 CITY-ST-ZIP BIRMINGHAM AL 35242

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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

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 JACK CHAPMAN 4/25/00

(205)823-5226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)