2001 UNIFORM BUSINESS REPORT (UBR)

## Jun 25, 2001 8:00 am DOCUMENT # F980000 2128/ **Secretary of State** 1. Entity Name AMERITECH Payphone Services, Inc. 06-25-2001 90043 025 \*\*\*550.00 Principal Place of Business Mailing Address 1010 N.ST. Mans 9-4.40 225 W. Randolph St San Antonio, Texas 78215 Chicago, IL bobole A0074726 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 3/0 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent - CT Corporation System / Name 1200 South Pine Island Road Street Address (P.O. Box Number is Not Acceptable) Plantation FL 33324 City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 President / TIT F Delete ☐ Addition Randall Feger NAME NAME 1010 N. 57 MGMS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SA, TK 74215 General Counsel and Sucretary CITY-ST-7IP ☐ Detete TITE F ☐ Change ☐ Addition Derek Dickinson. NAME NAME 175 E. HOUSTON . STREET ADORESS STREET ADDRESS 54,74 78205/ CITY-ST-7IP CITY-ST-ZIP Vice President/ TITLE ☐ Delete ☐ Change ☐ Addition Gary Hensley ---HAME HALLE STREET ADDRESS 1010 HIST MAND STREET ADDRESS CITY-ST-ZIP 54,44 18215 CITY-ST-78 Treasurer -☐ Delete Change ■ Addition Michael J. Viola NAME STREET ADDRESS 175 E. Houston . STREET ADDRESS CITY-ST-ZIP SA, 7x 78205. CITY-ST-ZIP mr ☐ Delete TITLE Change ☐ Addition MALE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME HAME STREET ADDRESS 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 cath; 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 any agree, with all other like empowered.

Michael

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

210-886-4907