

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003163

1. Entity Name

ETS PAYPHONES, INC.

FILED

Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90261 001 ***300.00

Principal Place of Business

1490 THORNTON ROAD
SUITE G
LITHIA SPRINGS GA 30122

Mailing Address

1490 THORNTON ROAD
SUITE G
LITHIA SPRINGS GA 30122

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 58-2131736

Applied For

Not Applicable

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

BUSINESS FILINGS INCORPORATED
1 EAST BROWARD BLVD., STE. 700
FT. LAUDERDALE FL 33301

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, 2001 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 P
NAME BLYTH, JAMES D
STREET ADDRESS 1490 WESTFORK DR. SUITE G
CITY-ST-ZIP LITHIA SPRINGS GA 30122 ☐ Delete

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

TITLE S
NAME SHEPLER, JOAN
STREET ADDRESS 1490 WESTFORK DR. SUITE G
CITY-ST-ZIP LITHIA SPRINGS GA 30122 ☒ Delete

TITLE Secretary AND President
NAME James D. Blyth
STREET ADDRESS 1490 Westfork Dr. Suite G
CITY-ST-ZIP Lithia Springs, GA 30122 ☒ Change ☐ Addition

TITLE CFO
NAME KADELKA, WALTER K
STREET ADDRESS 1490 WESTFORK DR. SUITE G
CITY-ST-ZIP LITHIA SPRINGS GA 30122 ☒ Delete

TITLE CFO
NAME Michael McClellan
STREET ADDRESS 1490 Westfork Dr. Suite G
CITY-ST-ZIP Lithia Springs, GA 30122 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

TITLE
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James D. Blyth

Date

Daytime Phone #

4/3/2001

770-819-1400

CR2E034 (10/00)