2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Leo A. Wrobel, President / CEO.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # **F98000005596** Mar 02, 2000 8:00 am **Secretary of State** PREMIERE NETWORK SERVICES, INC. 03-02-2000 90098 041 ***150.00 Principal Place of Business Mailing Address 1510 N. HAMPTON, STE, 210 1510 N. HAMPTON, STE. 210 DESOTO TX 75115-8301 DESOTO TX 75115 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 120 Suite 120 City & State City & State 4. FEI Number Applied For 75-2114047 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 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) 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. Chairman X Addition ☐ Change TITLE ☐ Delete TITLE BONHAM, HOWARD B Erbs. Harold NAME NAME STREET ADDRESS STREET ADDRESS 801 N. PITT ST. # 318 3206 N. Main Street CITY-ST-7IP CITY-ST-ZIP <u>Taylor TX 76574</u> ALEXANDRIA VA 22314 Change Addition TITLE ☐ Delete TITI F President & CEO WROBEL, LEO A NAME NAME Wrobel, Leo A. STREET ADDRESS STREET ADDRESS 100 OVILLA OAKS DR. 100 Ovilla Oaks Drive CITY-ST-ZIP CITY-ST-ZIE OVILLA TX 75154 Ovilla TX 75154 ☐ Change ☐ Addition TITLE Delete TITLE CROOM, ARCHIE NAME NAME STREET ADDRESS STREET ADDRESS '5013 STRICKLAND AVE. CITY-ST-ZIP CITY-ST-ZIP THE COLONY TX 75056 ☐ Delete TITLE ☐ Change Addition TITLE MAYBAUM, BILL NAME NAME STREET ADDRESS STREET ADDRESS 25 GOODALE ST. CITY-ST-ZIP CITY-ST-ZIP MARLBOROUGH MA 01752 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME WROBEL, SHARON NAME STREET ADDRESS STREET ADDRESS 100 OVILLA OAKS DR. CITY-ST-ZIE CITY-ST-ZIP OVILLA TX 75154 ☐ Change ☐ Delete TITLE Addition TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP stated in Section 119.07(3)(i), Florida Statutes | further certify that the information all have the same legal effect as if made under oath; that I am an officer or director Chapter 607 Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filing does not qualify for the exemptio indicated on this report or supplemental report is true and accurate and that my signature s of the corporation or the receiver or trustee empowered to execute this report as required b

972/228-8881

2-24-2000