**FILED** 

2-2-01 614-793-7000 Date Daytime Phone #

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1. Entity Nar	MENT # F980000 NET, INC nameholder			Feb 13, 20 Secretar 02-13-2001 906	001 8:00 y of Sta	te	
		Mailing Address 1013 CENTRE ROAD WILMINGTON DE 19805			0021171		
	Place of Business	3. Mailing Address	<del>.</del>				
2711 Centerville Road Suite, Apt. #, etc.		2711 Centerv	ille Road	DO NOT MIDITE	N THIS ODA OF		
Suite 400		Suite 400		DO NOT WRITE I	N THIS SPACE	•	
City & State Wilmington, DE 19808		City & State Wilmington, DE 19808		4. FEI Number 51-0387326	<del></del>	oplied For ot Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	See Require		
<u> </u>	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Reg	stered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				Street Address (P.O. Box Number is Not Acceptable)			
			City		FL Zip Cod	e	
Tax filing	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)  OFFICERS AND	FILE NOW!!! After MAY 1, 200 Make Check Payable	FEE IS \$150.00  FEE will be \$550.00  to Department of St	10. Election Campaign Financ	☐ Added	May Be to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS ANDRAS, KIMBERLY 1013 CENTRE ROAD WILMINGTON DE 19805	<b>IX</b> Delete	NAME TO 4	. Brad Sharp 600 Lakehurst Court ublin, OH 43016	🙀 Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD POPEO, WILLIAM G 1013 CENTRE ROAD WILMINGTON DE	∑ Delete	NAME 4	homas H. Lowe 600 Lakehurst Court ublin, OH 43016	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	WINN, BRUCE R 1013 CENTRE ROAD WILMINGTON DE	X Délète	STREET ADDRESS 4	ennis P. Byrnes 600 Lakehurst Court ablin, OH 43016	K Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS FLOWERS, MARY T 1013 CENTRE ROAD WILMINGTON DE	<b>Z</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		X Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MULLIGAN, LISA G 1013 CENTRE ROAD WILMINGTON DE	€XI Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS PELLETIER, JOHN H 1013 CENTRE ROAD WILMINGTON DE	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
of the cor	on this report or supplemental report is	true and accurate and that my wered to execute this report as	signature shall have the	ection 119.07(3)(i), Florida Statutes. I fur same legal effect as if made under oath 7, Florida Statutes; and that my name ap	· that I am an officer	or director	