

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006612

1. Entity Name

SIGCORP COMMUNICATIONS SERVICES, INC.

**FILED**  
**Jul 21, 2000 8:00 am**  
**Secretary of State**

07-21-2000 90156 048 \*\*\*550.00

Principal Place of Business

20 NW FOURTH STREET  
EVANSVILLE IN 47708

Mailing Address

20 NW FOURTH STREET  
EVANSVILLE IN 47708

2. Principal Place of Business

421 John Street

3. Mailing Address

421 John Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Evansville IN

City & State

Evansville IN

4. FEI Number

35-2025781  
35-2025759

Applied For

Not Applicable

Zip

47713

Country

USA

Zip

47713

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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)

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**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

TITLE	CP	<input checked="" type="checkbox"/> Delete
NAME	REHERMAN, RONALD G	
STREET ADDRESS	20 NW FOURTH STREET	
CITY-ST-ZIP	EVANSVILLE IN 47708	
TITLE	V	<input type="checkbox"/> Delete
NAME	DIDOMIZIO, JOHN A	
STREET ADDRESS	20 NW FOURTH STREET	
CITY-ST-ZIP	EVANSVILLE IN 47708	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	GOEBEL, ANDERW E	
STREET ADDRESS	20 NW FOURTH STREET	
CITY-ST-ZIP	EVANSVILLE IN 47708	
TITLE	ASAT	<input type="checkbox"/> Delete
NAME	BURKE, TIMOTHY	
STREET ADDRESS	20 NW FOURTH STREET	
CITY-ST-ZIP	EVANSVILLE IN 47708	
TITLE	ASAT	<input checked="" type="checkbox"/> Delete
NAME	BLENNER, LESLIE	
STREET ADDRESS	20 NW FOURTH STREET	
CITY-ST-ZIP	EVANSVILLE IN 47708	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	TIEMANN, LINDA K	
STREET ADDRESS	20 NW FOURTH STREET	
CITY-ST-ZIP	EVANSVILLE IN 47708	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Carl Chapman	
STREET ADDRESS	20 N W Fourth Street	
CITY-ST-ZIP	EVANSVILLE IN 47708	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	421 John Street	
STREET ADDRESS	Evansville IN	
CITY-ST-ZIP	47713	
TITLE	V/S/AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ron Christian	
STREET ADDRESS	20 N W Fourth Street	
CITY-ST-ZIP	Evansville IN 47708	
TITLE	VP/TIAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 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:

*John A. Didomizio* RE John A. Didomizio VP/GM

Date

7/11/00

Daytime Phone #

812-437-6717

CR2E034 115/00