

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000007042

1. Entity Name

XM SATELLITE RADIO INC.

FILED

May 16, 2001 8:00 am
Secretary of State

05-16-2001 90398 017 ***150.00

Principal Place of Business

15000 ECKINGTON PL NE
WASHINGTON DC 20002

Mailing Address

15000 ECKINGTON PL NE
WASHINGTON DC 20002

2. Principal Place of Business

1500 ECKINGTON PL NE

3. Mailing Address

1500 ECKINGTON PL NE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
WASHINGTON DC

City & State
WASHINGTON DC

4. FEI Number

52-1805102

Applied For

Not Applicable

Zip
20002

Country
USA

Zip
20002

Country
USA

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

N/A

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 PD ☐ Delete
NAME PANERO, HUGH
STREET ADDRESS 15000 ECKINGTON PL NE
CITY-ST-ZIP WASHINGTON DC 20002

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS 1500 ECKINGTON PL NE
CITY-ST-ZIP

TITLE SV ☐ Delete
NAME TITLEBAUM, JOSEPH M
STREET ADDRESS 15000 ECKINGTON PL NE
CITY-ST-ZIP WASHINGTON DC 20002

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

TITLE TSV ☐ Delete
NAME STUBBLEFIELD, HEINZ
STREET ADDRESS 15000 ECKINGTON PL NE
CITY-ST-ZIP WASHINGTON DC 20002

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

TITLE C ☐ Delete
NAME PARSONS, GARY M
STREET ADDRESS 15000 ECKINGTON PL NE
CITY-ST-ZIP WASHINGTON DC 20002

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

TITLE D ☐ Delete
NAME DAVIS, NATHANIEL A
STREET ADDRESS 15000 ECKINGTON PL NE
CITY-ST-ZIP WASHINGTON DC 20002

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

TITLE D ☐ Delete
NAME DONOHUE, THOMAS J
STREET ADDRESS 15000 ECKINGTON PL NE
CITY-ST-ZIP WASHINGTON DC 20002

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
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:

Joseph M. Titubaum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2001

Date

202. 380. 4000

Daytime Phone #

CR2E034 (10/00)