## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # F98000007100 1. Entity Name EXIGENT DIGITAL TELECOM & WIRELESS NETWORKS, INC 05-11-2001 90313 018 \*\*\*158.75 Principal Place of Business Mailing Address 1830 PENN ST 1830 PENN ST MELBOURNE FL 32904 MELBOURNE FL 32904 000621332. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc City & State Applied For 4. FEI Number City & State 59-3464867 Not Applicable \$8.75 Additional Zip Country Zip Country X 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Director/President TITLE Delete TITLE RIDGE, GAVIN C NAME Bernard R. Smedley NAME **1830 PENN ST** STREET ADDRESS STREET ADDRESS 1830 Penn Street CITY-ST-ZIP **MELBOURNE FL 32904** CITY-ST-ZIP Melbourne, FL-32901 Director/Secretary Addition Change TD TITLE Delete TITLE WEINRESS, JEFFERY B NAME Patricia A. Frank NAME **1830 PENN ST** STREET ADDRESS 1830 Penn Street STREET ADDRESS MELBOURNE FL 32904 CITY-ST-ZIP CITY-ST-ZIP Melbourne, FL 32901 ☐ Change Addition ASD TITLE Delete Director TITLE DAWLEY, STUART P NAME Vincent J. Kovarik NAME 1830 PENN ST STREET ADDRESS STREET ADDRESS 1830 Penn Street CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32904 Melbourne, FL 32901 ☐ Addition SD Change TITLE X Delete TITLE RIORDAN, DON F JR NAME NAME 1830 PENN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MELBOURNE FL 32904** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE Director/Treasurer TITLE BALL, SALLY H NAME NAME 1830 PENN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32904 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PR PRINTED NAME OF SIGNING OFFICER OR DIRECT