2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 AM
Secretary of State

DOCUMENT# F99000001634

Entity Name: CARONET, INC.

Current Principal Place of Business:

P.O. BOX 13961
RESEARCH TRIANGLE PARK, NC 277093961

New Principal Place of Business:

Current Mailing Address:

PO BOX 1551, PMB 1785
RALEIGH, NC 27602

New Mailing Address:

FEI Number: 56-2063691 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PENINSULA REGISTERED AGENTS, INC.
215 S. MONROE ST., STE. 601
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	CAVANAUGH, WILLIAM III	
Address:	PO BOX 155, 411 FAYETTEVILLE ST MALL	
City-St-Zip:	RALEIGH, NC 27601	
Title:	D	( ) Delete
Name:	ORSER, WILLIAM S	
Address:	411 FAYETTEVILLE ST MALL P.O. BOX 1551	
City-St-Zip:	RALEIGH, NC 27602	
Title:	D	( ) Delete
Name:	MCGEHEE, ROBERT B	
Address:	411 FAYETTEVILLE ST. MALL	
City-St-Zip:	RALEIGH, NC 27601	
Title:	D	( ) Delete
Name:	MCGEHEE, ROBERT B	
Address:	PO BOX 1551, 411 FAYETTEVILLE ST MALL	
City-St-Zip:	RALEIGH, NC 27601	
Title:	D	( ) Delete
Name:	SCOTT, PETER M III	
Address:	PO BOX 1551, 411 FAYETTEVILLE ST MALL	
City-St-Zip:	RALEIGH, NC 27601	
Title:	CS	( ) Delete
Name:	JOHNSON, WILLIAM D	
Address:	PO BOX 1551, 411 FAYETTEVILLE ST MALL	
City-St-Zip:	RALEIGH, NC 27601	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM D. JOHNSON CS 02/11/2002

Electronic Signature of Signing Officer or Director — Date