

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 03, 2002 8:00 am
Secretary of State

06-03-2002 91200 039 ***150.00

DOCUMENT # F99000004004

1. Entity Name

Intercall, Inc

DO NOT WRITE IN THIS SPACE

B0124158

2. Principal Place of Business
1211 O.G. Skunner Dr
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 150
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
West Point, GA

City & State
West Point GA

4. FEI Number 58-1942497

Applied For
Not Applicable

Zip 31833

Country US

Zip 31833

Country US

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City Tallahassee FL Zip Code 32301-2526

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 file 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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	Pres	TITLE	
NAME	Etzler, Scott	NAME	
STREET ADDRESS	825 Forest Ave	STREET ADDRESS	
CITY-ST-ZIP	Wilmette IL 60091	CITY-ST-ZIP	
TITLE	VP	TITLE	
NAME	Turnbull, Greg	NAME	
STREET ADDRESS	7651-1 Rivercrest Dr.	STREET ADDRESS	
CITY-ST-ZIP	Columbus GA 31904	CITY-ST-ZIP	
TITLE	S	TITLE	
NAME	Thompson, Kimberly E	NAME	
STREET ADDRESS	4717 Dolphin Lane	STREET ADDRESS	
CITY-ST-ZIP	Alexandria VA 22309	CITY-ST-ZIP	
TITLE	V	TITLE	
NAME	Lamb, Robert	NAME	
STREET ADDRESS	401 E 4th St	STREET ADDRESS	
CITY-ST-ZIP	West Point, GA 31833	CITY-ST-ZIP	
TITLE	C	TITLE	
NAME	Lanier, Campbell B, III	NAME	
STREET ADDRESS	1601 Tanyard Rd	STREET ADDRESS	
CITY-ST-ZIP	Lanett AL 36863	CITY-ST-ZIP	
TITLE	VC	TITLE	
NAME	Scott, William H, III	NAME	
STREET ADDRESS	91 Highland Dr	STREET ADDRESS	
CITY-ST-ZIP	West Point GA 31833	CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

[Signature]

Greg Turnbull

5/29/02 706-634-6244

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)