

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004355

1. Entity Name

AVANA COMMUNICATIONS CORPORATION

Principal Place of Business

1690 CHANTILLY DRIVE
ATLANTA GA 30324

Mailing Address

1690 CHANTILLY DRIVE
ATLANTA GA 30324

2. Principal Place of Business

1255 Lakes Parkway

Suite, Apt. #, etc.

Suite 100

City & State

Lawrenceville, GA

Zip

30043

Country

US

3. Mailing Address

1255 Lakes Parkway

Suite, Apt. #, etc.

Suite 100

City & State

Lawrenceville, GA

Zip

30043

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

58-2193081

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

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) ☐

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

TITLE P
NAME BLANCHARD, JAMES M
STREET ADDRESS 1690 CHANTILLY DRIVE
CITY-ST-ZIP ATLANTA GA 30324 ☐ Delete

TITLE VF
NAME FOREGGER, JAMES C
STREET ADDRESS 1690 CHANTILLY DRIVE
CITY-ST-ZIP ATLANTA GA 30324 ☐ Delete

TITLE P
NAME BLANCHARD, JAMES M
STREET ADDRESS 9010-2 NESSBITT FERRY ROAD
CITY-ST-ZIP ALPHARETTA GA 30022 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME Blanchard, James M
STREET ADDRESS 1255 Lakes Parkway, Suite 100
CITY-ST-ZIP Lawrenceville, GA 30043

TITLE VF ☒ Change ☐ Addition
NAME Foregger, James C
STREET ADDRESS 1255 Lakes Parkway, Suite 100
CITY-ST-ZIP Lawrenceville, GA 30043

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

TITLE S ☐ Change ☒ Addition
NAME Rapson, Vicki B
STREET ADDRESS 1255 Lakes Parkway, Suite 100
CITY-ST-ZIP Lawrenceville, GA 30043

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

TITLE ☐ Change ☐ 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)(f), 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: Vicki B Rapson Vicki B Rapson 05-24-01 678 252 1248
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2034 (10/00)

FILED
Jun 02, 2001 8:00 am
Secretary of State

05-11-2001 90067 040 ***150.00

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