## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000004832

Entity Name: WAYPORT, INC.

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6363 NORTH STATE HIGHWAY 161 SUITE 650 IRVING, TX 75038				ONE AT&T WAY ROOM 4A248 BEDMINSTER, NJ 07921			
Current Mailing Address:				New Mailing Address:			
6363 NORTH STATE HIGHWAY 161 SUITE 650 IRVING, TX 75038			ONE AT&T WAY ROOM 4A248 BEDMINSTER, NJ 07921				
FEI Number:	74-2886905	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Status D	esired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US  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	İ			Date	
Election Campaign Financing Trust Fund Contribution ( ).							
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS							
Title: Name: Address: City-St-Zip:	VUCINA, DAVID	Delete ATE HIGHWAY 161, SUITE 650 38		Title: Name: Address: City-St-Zip:	PD (X WISKOCIL, AN 4509 FREIDRIG AUSTIN, TX 78	CH LANE	
Title: Name: Address: City-St-Zip:	KIELEY, KEN	Delete ATE HIGHWAY 161, SUITE 650 38		Title: Name: Address: City-St-Zip:	T (X ALLEN, CHARL 208 S AKARD : DALLAS, TX 7	STREET	
Title: Name: Address: City-St-Zip:	WILLIAMS, GOR	ATE HIGHWAY 161, SUITE 650		Title: Name: Address: City-St-Zip:	CFO (X CRAFT, ALLEN 530 MCCULLO SAN ANTONIO,	UGH AVENUE	
Title: Name: Address: City-St-Zip:	LONG, JOHN	Delete ATE HIGHWAY 161, SUITE 650 38		Title: Name: Address: City-St-Zip:	( )	) Change()Addition	
Title: Name: Address: City-St-Zip:	KIMZEY, JACKÍE	ATE HIGHWAY 161, SUITE 650		Title: Name: Address: City-St-Zip:	( )	) Change()Addition	
Title: Name: Address: City-St-Zip:	EVANS, JOHN	Delete ATE HIGHWAY 161, SUITE 650 38		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES P. ALLEN T 04/10/2009