

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000005097

1. Entity Name

SURETEL, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90937 029 ***150.00

Principal Place of Business

Mailing Address

5 NORTH MCCORMICK
OKLAHOMA CITY OK 73127

5 NORTH MCCORMICK
OKLAHOMA CITY OK 73127-6620

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **73-1498280**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DCEO	<input type="checkbox"/> Delete
NAME	GAUNT, ROYCE	
STREET ADDRESS	124 WEST VINITA	
CITY-ST-ZIP	SULPHUR OK 73086	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BRIGHT, J B	
STREET ADDRESS	124 WEST VINITA	
CITY-ST-ZIP	SULPHUR OK 73086	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	BAKER, R. PHILLIP	
STREET ADDRESS	5. N. MCCORMICK	
CITY-ST-ZIP	OKLAHOMA CITY OK 73127	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	HESTER, JACK	
STREET ADDRESS	124 WEST VINITA	
CITY-ST-ZIP	SULPHUR OK 73086	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	CHADWICK, JANE	
STREET ADDRESS	124 WEST VINITA	
CITY-ST-ZIP	SULPHUR OK 73086	
TITLE	ASD	<input checked="" type="checkbox"/> Delete
NAME	RILEY, TOM	
STREET ADDRESS	5 NORTH MCCORMICK	
CITY-ST-ZIP	OKLAHOMA CITY OK 73127	

TITLE	D/CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	R. Phillip Baker	
STREET ADDRESS	5 N. McCormick	
CITY-ST-ZIP	OKLAHOMA CITY, OK 73127	
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Thomas C. Boothe	
STREET ADDRESS	5 N. McCormick	
CITY-ST-ZIP	OKLAHOMA CITY, OK 73127	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Charles D. Harrell	
STREET ADDRESS	5 N. McCormick	
CITY-ST-ZIP	OKLAHOMA CITY, OK 73127	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Royce E. Gauntt	
STREET ADDRESS	124 W. Vinita	
CITY-ST-ZIP	Sulphur, OK 74884	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Scott S. Binder	
STREET ADDRESS	1919 Pennsylvania Ave.	
CITY-ST-ZIP	Washington, DC 20006	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael S. Fisher	
STREET ADDRESS	120 Long Ridge Road	
CITY-ST-ZIP	Stamford, CT 06927	

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

SIGNATURE: Thomas C. Boothe 3/31/00 405-942-1177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)