2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H99229

1. Entity Name

WORLD SATELLITE, INC.

FILED
May 13, 2000 8:00 am
Secretary of State
05-13-2000 90041 028 ***150.00

Principal Place of Business	Mailing Address
% RODNEY STELTER 4377-H CRAWFORDVILLE HIGHWAY TALLAHASSEE FL 32310	% RODNEY STELTER 4377-H CRAWFORDVILLE HIGHWAY TALLAHASSEE FL 32310-7036

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
186 HORSESHOE TRL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CRAWFORDVILLE	City & State
Zip: 32327 Country: WAKULLA	Zip Country

4. FEI Number 59-2635593 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CHILDRESS, DIANNA L.
4377 H CRAWFORDVILLE HWY
TALLAHASSEE FL 32310

7. Name and Address of New Registered Agent

Name: RODNEY C. STELTER
Street Address (P.O. Box Number is Not Acceptable): 186 HORSESHOE TRL.
City: CRAWFORDVILLE 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: Rodney C. Stelter
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 NAME STREET ADDRESS CITY-ST-ZIP	ST CHILDRESS, DIANNA L. 4377-H CRAWFORDVILLE HWY TALLAHASSEE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STELTER, RODNEY C. 186 HORSESHOE TR. CRAWFORDVILLE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/99)

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: Rodney C. Stelter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #