| FILE N | NOW: FILING FEE. | AFTER MAY 1 | ST IS | \$550.00 |) | • | | |
|---|---|---|-------------------------------|--|--|--|-----------------|--|
| | | | EPARTMENT OF STATE | | |] FILED | | |
| CORPORATION S ANNUAL REPORT | | | ndra B. Mortham | | | 00 800 1 00 00 10 | | |
| 4000 | | | | cretary of State OF CORPORATIONS | | 90 Mar - 1 PH 3: 49 | | |
| DOCUMENT # L03742 | | | | | | SECRETARY OF STATE TALLAHASSEF, FLORIDA | | |
| | ETWORK, INC. | | | | | 100002793471~ | " « . | |
| | | | | | | ∫ -03/03/990107100 | 11 | |
| Principal Place of Business Mailing Address 242 Falcon Drive 242 Falcon | | | | | | ****750.00 ****150 | .00 | |
| Forest Park, GA 30297 Forest Park | | | | 10297 | | DO NOT WRITE IN THIS SPACE | | |
| US US | | | , 41 50257 | | | 3. Date Incorporated or Qualified | | |
| 2. Principal Place of Business 2s. Mailing Address | | | | | | 07/18/1989 4. FEI Number Applied For | ┥ | |
| 21 26 6322 Sout | | | | | | 65-0145778 Not Applicabl | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27 | | | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | |
| City & State | City & State | - | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | 1 | | |
| Zip | Country | 28 Salt Lake | | intry | | 7,000,01,000 | - | |
| 24 | 25] | 29 84121 | 30 US | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No | - | |
| 9.1 | Name and Address of Current | Registered Agent | | 24 11 | | 10. Name and Address of New Registered Agent | 7 | |
| CT Corporation System | | | | 81 Name | | | | |
| 1200 South Pine Island Road Plantation, FL 33324 | | | | 82 Street Address 83 B4 City | | ess (P.O. Box Number is Not Acceptable) | | |
| | | | | | | | 7 | |
| | | | | | | FL 85 Zip Code | 7 | |
| registered of appointment SIGNATURE | fice or registered agent, or both, as registered agent. I am familia | in the State of Florida. ar with, and accept the c | Such chang obligations o | e was author of, Section 6 | rized b 07.050 | corporation submits this statement for the purpose of changing its by the corporation's board of directors. I hereby accept the 5, Florida Statutes. DATE | _ | |
| 12, | pnature, typed or printed name of registered agent and title if app OFFICERS AND DIRECTORS | | 13. | , | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | DP | DELETE | 1.1 TITLE | | DP | X Change Addition | 7 6 | |
| NAME STREET ADDRESS | Richard DeWitt 242 Falcon Drive | | | 1.2 NAME 1.3 STREET ADDRESS | | chard DeWitt | = | |
| CITY - ST - ZIP | Forest Park, GA 3 | 0050-1602 | | - ST - ZIP | | est Park, GA 30297 | 03 | |
| TITLE | D | DELETE | 2.1 TITLE | | 1 | retary Change X Addition | CR2E034 (10/97) | |
| NAME STREET ADDRESS | Marc Cohen 242 Falcon Drive | | | | | ty Huebschman 2 South 3000 East | 10 | |
| CITY - ST - ZIP | Forest Park, GA 30050-1602 | | | 1 | | t Lake City, UT 84121 | | |
| TITLE | D DELETE | | • | 3.1 TITLE 3.2 NAME | | Change Addition | | |
| NAME STREET ADDRESS | Lyle Keys 6322 South 3000 East | | | 3.3 STREET ADDRESS | | | 1 | |
| CITY - ST - ZIP | Salt Lake City, UT 84121 | | 3.4 CITY | 3.4 CITY - ST - ZIP | | | | |
| TITLE NAME | Steven Swenson | X DELETE | | 4.1 TITLE 4.2 NAME | | Change Addition | | |
| STREET ADDRESS | 6322 South 3000 East | | | 4.3 STREET ADDRESS | | | | |
| CITY - ST - ZIP | Salt Lake City, U | | | - ST - ZIP | <u> </u> | | _] | |
| TITLE NAME | D Christopher Gaffn | DELETE | 5.1 TITLE 5.2 NAME | | | Change Addition | 1 | |
| STREET ADDRESS | S 75 State Street, Suite 2500 | | | 5.3 STREET ADDRESS | | | | |
| CITY - ST - ZIP | Boston, MA 02109 | | | - ST - ZIP | } | | 4 | |
| TITLE NAME | John Hayes | DELETE | | 6.1 TITLE 6.2 NAME | | Change Addition | | |
| STREET ADDRESS | TREET ADDRESS 75 State Street, Suite 2500 | | | ET ADDRESS | ļ | | | |
| 14. I hereby cert | with this filing does not | 6.4 CITY qualify for t | | state | of in Section 119.07(3)(i), Florida Statutes. I further certify that the | 4 | | |
| information i oath; that I a | indicated on this annual peport o | r supplemental annual r rporation or the receiver | eport is true r or trustee | e and accura empowered | te and | I that my signature shall have the same legal effect as if made under cute this report as required by Chapter 607, Florida Statutes; and that | . ≱/ \ | |
| SIGNATU | JRE: A . HOLL SIGNATURE AND TYPED | OR PRINTED NAME OF S | IGNING OFF | ICER OR DIR | CTOR | 30 2/10/95 (801)947-8107 | <u>)</u> 3 | |

STF FL32381F.1