

# 2001 UNIFORM BUSINESS REPORT (UBR)

192

0026669 AF

DOCUMENT # M00000000823

1. Entity Name

EXPANETS OF NORTH AMERICA, LLC

FILED

01 FEB 22 PM 4:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

TWO OAK WAY  
BERKELEY HEIGHTS NJ 07922

Mailing Address

TWO OAK WAY  
BERKELEY HEIGHTS NJ 07922

2. Principal Place of Business

9780 MT. PYRAMID CT.

3. Mailing Address

9780 MT. PYRAMID CT.

Suite, Apt. #, etc.

400

Suite, Apt. #, etc.

400

City & State

ENGLEWOOD, CO

City & State

ENGLEWOOD, CO

Zip

80112

Country

DOUGLAS

Zip

80112

Country

DOUGLAS

4. FEI Number

91-2038252

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

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

W/A

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PLEASE SEE ATTACHED ☐ 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
000003782900--9  
-02/27/01--01088--013  
\*\*\*\*\*55.00 \*\*\*\*\*55.00

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

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

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

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)

262

**Expanets of North America, LLC**  
**Officer Listings**  
**FEIN: 91-2038252**

<b>Name</b>	<b>Title</b>	<b>Social Security Number</b>
James R. Walker	President	448-46-4134
Luke M. Beshar	Vice President/Asst. Controller	145-38-6719
Christopher J. Younger	Vice President/Secretary/Asst. Controller	320-50-8239

**Address**  
9780 Mount Pyramid Court, Englewood, Colorado 80112

**Telephone**  
303-300-6300