

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000002337

1. Entity Name
POWERTEL BIRMINGHAM TOWERS, LLC

Principal Place of Business
1239 O.G. SKINNER DRIVE
WEST POINT GA 31833

Mailing Address
1239 O.G. SKINNER DRIVE
WEST POINT GA 31833

2. Principal Place of Business
12920 S.E. 38th street
Suite, Apt. #, etc.

3. Mailing Address
12920 S.E. 38th street
Suite, Apt. #, etc.

City & State
Bellevue, WA

City & State
Bellevue, WA

Zip 98006 **Country** USA

Zip 98006 **Country** USA

APPROVED
AND
FILED

01 SEP 18 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2468819 **Applied For** Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.
900004597319--6

SIGNATURE _____ **DATE** _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 26, 2001

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMITH, ALLEN E 1239 O.G. SKINNER DRIVE WEST POINT GA 31833 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager John W. Stanton 12920 S.E. 38 th street Bellevue, WA 98006 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ASTOR, FRED G JR. 1239 O.G. SKINNER DRIVE WEST POINT GA 31833 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Robert R. Stapleton 12920 S.E. 38 th street Bellevue, WA 98006 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DORSEY, JILL F 1239 O.G. SKINNER DRIVE WEST POINT GA 31833 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Alan R. Bender 12920 S.E. 38 th street Bellevue, WA 98006 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Brian Kirkpatrick 12920 S.E. 38 th street Bellevue, WA 98006 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager David A. Miller 12920 S.E. 38 th street Bellevue, WA 98006 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Lee A. Testevin 12920 S.E. 38 th street Bellevue, WA 98006 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: *Lee A. Testevin* **SIGNATURE REQUIRED** Lee A. Testevin 9/4/01 (425) 378-4800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

STAPLE CHECK HERE

CR2E083 (5/01)

0008375



202

ACCOUNT NO. : 072100000032
REFERENCE : 485520 7156704
AUTHORIZATION : *Patricia Pigute*
COST LIMIT : \$ 50.00

ORDER DATE : September 17, 2001

ORDER TIME : 1:33 PM

ORDER NO. : 485520-030

CUSTOMER NO: 7156704

CUSTOMER: Ms. Cherie Scott
Voicestream Wireless
12920 Se 38th Street

Bellevue, WA 98006

ANNUAL REPORT FILING

NAME: POWERTEL BIRMINGHAM TOWERS,
LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - Ext. 1118

EXAMINER'S INITIALS: _____

RECEIVED
01 SEP 18 PM 2:24
DIVISION OF CORPORATION