

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000000767

1. Entity Name

PRIVATE NETWORKS, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JAN 31 AM 8:46

Principal Place of Business

7373 EAST DOUBLETREE RANCH ROAD, STE. 155
SCOTTSDALE AZ 85258

Mailing Address

7373 EAST DOUBLETREE RANCH ROAD, STE. 155
SCOTTSDALE AZ 85258-2144

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

86-0830034

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 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

MOUSER, FREDERICK L ESQ.
C/O MOUSER & WELLS, P.A.
810 63RD AVENUE NORTH
ST. PETERSBURG FL 33702

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

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

9. MANAGING MEMBERS/MEMBERS

TITLE MGR
NAME LITTLE, DENNIS L
STREET ADDRESS 3131 GREENHEAD DRIVE, SUITE D
CITY- ST- ZIP SPRINGFIELD IL 62707

TITLE MGR
NAME MALMBERG, NANCY
STREET ADDRESS 7373 EAST DOUBLETREE RANCH ROAD, STE. 155
CITY- ST- ZIP SCOTTSDALE AZ 85258

TITLE MGRM
NAME RICHARDSON, BRENT
STREET ADDRESS 7373 EAST DOUBLETREE RANCH ROAD, STE. 155
CITY- ST- ZIP SCOTTSDALE AZ 85258

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE Member
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE MGRM
NAME Richardson, Gail
STREET ADDRESS 7373 E. Doubletree Ranch Rd., STE 155
CITY- ST- ZIP Scottsdale, AZ 85258

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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:

Gail Richardson

Date

Daytime Phone #

1/11/00 (480) 388-5920