

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90173 010 \*\*\*150.00

**DOCUMENT # P00000079825**

**1. Entity Name**  
**SBA BROADBAND SERVICES, INC.**

**Principal Place of Business**

~~ONE TOWN CENTER ROAD, 3RD FLOOR~~  
**BOCA RATON FL 33486**

**Mailing Address**

~~ONE TOWN CENTER ROAD, 3RD FLOOR~~  
**BOCA RATON FL 33486**

**2. Principal Place of Business**

**5900 Broken Sound Parkway N.W.**  
**Boca Raton, FL 33487**

**3. Mailing Address**

**Attn: Legal Dept.**  
**5900 Broken Sound Parkway N.W.**  
**Boca Raton, FL 33487**



DO NOT WRITE IN THIS SPACE

**4. FEI Number**

**65-1036222**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired** ☐

**\$8.75 Additional**  
**Fee Required**

**Zip**

**Country**

**USA**

**Zip**

**Country**

**USA**

**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.**

**SIGNATURE**

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, 2002 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**

<b>TITLE</b>	<b>CEO</b>	<input checked="" type="checkbox"/> Delete
<b>NAME</b>	<b>BERNSTEIN, STEVEN E</b>	
<b>STREET ADDRESS</b>	<b>1 TOWN CTR RD, 3RD FLR</b>	
<b>CITY-ST-ZIP</b>	<b>BOCA RATON FL 33486</b>	
<b>TITLE</b>	<b>EVP</b>	<input checked="" type="checkbox"/> Delete
<b>NAME</b>	<b>BIZICK, RONALD</b>	
<b>STREET ADDRESS</b>	<b>1 TOWN CTR RD, 3RD FLR</b>	
<b>CITY-ST-ZIP</b>	<b>BOCA RATON FL 33486</b>	
<b>TITLE</b>	<b>AS.</b>	<input type="checkbox"/> Delete
<b>NAME</b>	<b>BRESKIN, THERESA NICK</b>	
<b>STREET ADDRESS</b>	<b>1 TOWN CTR RD, 3RD FLR</b>	
<b>CITY-ST-ZIP</b>	<b>BOCA RATON FL 33486</b>	
<b>TITLE</b>	<b>COAS</b>	<input checked="" type="checkbox"/> Delete
<b>NAME</b>	<b>GROBSTEIN, ROBERT M</b>	
<b>STREET ADDRESS</b>	<b>1 TOWN CTR RD, 3RD FLR</b>	
<b>CITY-ST-ZIP</b>	<b>BOCA RATON FL 33486</b>	
<b>TITLE</b>	<b>VPGC</b>	<input type="checkbox"/> Delete
<b>NAME</b>	<b>HUNT, THOMAS P</b>	
<b>STREET ADDRESS</b>	<b>1 TOWN CTR RD, 3RD FLR</b>	
<b>CITY-ST-ZIP</b>	<b>BOCA RATON FL 33486</b>	
<b>TITLE</b>	<b>CAO</b>	<input type="checkbox"/> Delete
<b>NAME</b>	<b>KLINE, PAMELA J</b>	
<b>STREET ADDRESS</b>	<b>1 TOWN CTR RD, 3RD FLR</b>	
<b>CITY-ST-ZIP</b>	<b>BOCA RATON FL 33486</b>	

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

<b>TITLE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	<b>See attached</b>
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

**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:**

**SIGNATURE REQUIRED** **thomas P. Hunt** **1/8/02** **561-995-7670**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment  
 Doc# 100000079825  
 131091

**DIRECTORS AND OFFICERS OF SBA BROADBAND SERVICES, INC.**

<b>Name</b>	<b>Address</b>	<b>Title</b>
Theresa Nick Breskin	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Assistant Secretary
Jack Fiedor	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Chief Accounting Officer Vice President Assistant Secretary Assistant Treasurer
Thomas P. Hunt	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Senior Vice President General Counsel Secretary/Assistant Treasurer
Pamela J. Kline	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Vice President Assistant Secretary Assistant Treasurer
John Marino	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Chief Financial Officer Senior Vice President Treasurer/Assistant Secretary <b>Director</b>
Jeffrey A. Stoops	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Chief Executive Officer President Assistant Secretary Assistant Treasurer <b>Director</b>
Kurt Bagwell	5900 Broken Sound Parkway N.W. Boca Raton, FL 33487	Vice President
Reid Boynton	900 Cummings Center Suite 216 U Beverly, MA 01915	Vice President
Jeff Langdon	7200 W. 132 <sup>nd</sup> Street Suite 150 Overland Park, KS 66213	Vice President
Jim Williamson	990 Holcomb Bridge Road Suite 2 Roswell, GA 30076	Vice President
Neil Wiser	5445 DTC parkway Suite 310 Greenwood Village, CO 80111	Vice President