## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000116671

Entity Name: MAMMOTH 2 COMMUNICATIONS GROUP, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
040 VA A D A M O OT CUUTE 540	D 0 D0Y 1000

218 W ADAMS ST, SUITE 510 P.O. BOX 4092 JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32201

Current Mailing Address: New Mailing Address:

P O BOX 4092 JACKSONVILLE, FL 32201

FEI Number: 59-3688789 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134 US

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:

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

 Name:
 GRIGGS, CHARLES
 Name:
 GRIGGS, CHARLES

 Address:
 218 W ADAMS ST, SUITE 510
 Address:
 P.O. BOX 4092

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32201

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition

 Name:
 FULLWOOD, REGGIE
 Name:
 FULLWOOD, REGGIE

 Address:
 218 W ADAMS ST, SUITE 510
 Address:
 P.O. BOX 4092

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32201

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES GRIGGS PTD 04/29/2002