

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000123282

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: WI-GATE COMMUNICATIONS INC.

## Current Principal Place of Business:

1386-B SHORLINE DR.  
GULF BREEZE, FL 32561 US

## New Principal Place of Business:

1386-B SHORELINE DR.  
GULF BREEZE, FL 32561 US

## Current Mailing Address:

5505 SOUNSIDE DR.  
GULF BREEZE, FL 32563 US

## New Mailing Address:

3749-D GULF BREEZE PKWY #268  
GULF BREEZE, FL 32563 US

FEI Number: 16-1660634

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, TIM  
5505 SOUNSIDE DR  
GULF BREEZE, FL 32563 US

## Name and Address of New Registered Agent:

JOHNSON, TIM  
3749-D GULF BREEZE PKWY #268  
GULF BREEZE, FL 32563 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:

04/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR ( ) Change (X) Addition  
Name: OWENS, DAVID  
Address: 404 KENNILWORTH DR,  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: TR ( ) Change (X) Addition  
Name: JOHNSON, TIM  
Address: 3749-D GULF BREEZE PKWY #268  
City-St-Zip: GULF BREEZE, FL 32563 US

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: TIM JOHNSON

TR

04/29/2003

Electronic Signature of Signing Officer or Director

Date