

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 18, 2012
Secretary of State

Entity Name: SBA NETWORK MANAGEMENT, INC.

Current Principal Place of Business:

5900 BROKEN SOUND PARKWAY NW
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

5900 BROKEN SOUND PARKWAY NW
ATTN: LEGAL DEPARTMENT
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 56-2349510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CFOT
Name: CAVANAGH, BRENDAN
Address: 5900 BROKEN SOUND PARKWAY NW
City-St-Zip: BOCA RATON, FL 33487

Title: S/GC
Name: HUNT, THOMAS P
Address: 5900 BROKEN SOUND PARKWAY NW
City-St-Zip: BOCA RATON, FL 33487

Title: CAO
Name: LAZARUS, BRIAN
Address: 5900 BROKEN SOUND PARKWAY NW
City-St-Zip: BOCA RATON, FL 33487

Title: SVP
Name: CIARFELLA, MARK
Address: 5900 BROKEN SOUND PARKWAY NW
City-St-Zip: BOCA RATON, FL 33487

Title: CEOP
Name: STOOPS, JEFFREY A
Address: 5900 BROKEN SOUND PARKWAY NW
City-St-Zip: BOCA RATON, FL 33487

Title: CAO
Name: LAZARUS, BRIAN
Address: 5900 BROKEN SOUND PARKWAY NW
City-St-Zip: BOCA RATON, FL 33487

I hereby 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 all other like empowered.

SIGNATURE: THOMAS P. HUNT

S/GC

04/18/2012

Electronic Signature of Signing Officer or Director

Date