2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # P12182 May 18, 2000 8:00 am 1. Entity Name Secretary of State PACTEL PROPERTIES-GAINESVILLE, INC. 05-18-2000 90355 040 ***150.00 Principal Place of Business Mailing Address 175 E. HOUSTON 430 BUSH ST 3RD FLOOR ROOM 8-H-60 SAN ANTONIO TX 78205-2255 SAN FRANCISCO CA 94108 US 2. Principal Place of Business 3. Mailing Address MS E. Houston ST Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Rn 8-4-60 City & State 4. FEI Number Applied For City & State 94-2995125 San Ontonio Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired 78205 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES ST. STE. 105 TALLAHASSEE FL 32301 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 DATE and name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. **PCEO** CFO Change Addition TITLE ☐ Delete TITLE MILLEY, William M. MILLER, WILLIAM NAME NAME STREET ADDRESS 2600 CAMINO RAMON STREET ADDRESS CITY-ST-ZIP SAN RAMON CA 94583 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE HENRY, DUANE G NAME NAME STREET ADDRESS STREET ADDRESS 140 NEW MONTOMERY ST RM 1727 CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94105 AS TITLE ☐ Addition ☐ Delete TITLE LAURO, Phillip J. LAURO, PHILIP H NAME NAME STREET ADDRESS STREET ADDRESS 430 BUSH ST CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94108 PDC Delete TITLE ☐ Change ☐ Addition TITLE MILLER, W M NAME NAME STREET ADDRESS STREET ADDRESS 130 KEARNY ST. CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA Delete TITLE ☐ Change ☐ Addition TITLE NAME HENRY, DUANE G NAME STREET ADDRESS STREET ADDRESS 140 NEW MONTGOMERY CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94105 Change ☐ Addition Delete ΑT TITLE LAURO, PHILLIP J NAME STREET ADDRESS 430 BUSH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94108 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

SIGNATURE:

JOHN J. STEPHENS

SHARTUPE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

4/27/00

210-351<u>-3901</u>

Daytime Phone #