

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 05, 2001 8:00 am**  
**Secretary of State**

02-05-2001 90121 016 \*\*\*150.00

**DOCUMENT # P17452**

1. Entity Name  
**AIRTOUCH PAGING, INC.**

Principal Place of Business

Mailing Address

**12221 MERIT DRIVE  
 SUITE 800  
 DALLAS TX 75251  
 US**

**C/O ANNE SHUFORD  
 1 CALIFORNIA STREET, 21ST FLOOR  
 SAN FRANCISCO CA 94111  
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**2999 Oak Road**

3. Mailing Address  
**2999 Oak Road**

Suite, Apt. #, etc.  
**10th Floor**

Suite, Apt. #, etc.  
**10th Floor**

City & State  
**Walnut Creek, CA**

City & State  
**Walnut Creek, CA**

4. FEI Number **94-3058969**

Applied For  
 Not Applicable

Zip  
**94596**

Country

Zip  
**94596**

Country  
**USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
 1201 HAYES ST.  
 SUITE 105  
 TALLAHASSEE FL 32301**

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP KRAMER, TERRY 1 CALIFORNIA ST 30TH FLOOR SAN FRANCISCO CA 94111</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DAT LANGSTON, EDWARD ONE CALIFORNIA ST., 30TH FLOOR SAN FRANCISCO CA 94111</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V ANDERSON, D.J. 12221 MERIT DRIVE #800 DALLAS TX</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S STACHIW, M.A. 12221 MERIT DRIVE #800 DALLAS TX 75251</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS CALIGARI, GREGORY 1 CALIFORNIA STREET, 21ST FLOOR SAN FRANCISCO CA 94111</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V DIAMANTE, TOM 12221 MERIT DR, STE 800 DALLAS TX 75251</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President, Director William Keever 2999 Oak Road Walnut Creek, CA 94596</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP, CFO &amp; Treasurer; Director Jack Lester 2999 Oak Road Walnut Creek, CA 94596</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition X (Change)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary; Director Erik Young 2999 Oak Road Walnut Creek, CA 94596</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assistant Secretary Melissa Kennedy 2999 Oak Road Walnut Creek, CA 94596</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assistant Treasurer Martin Pletkin 2999 Oak Road Walnut Creek, CA 94596</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Melissa Kennedy, Assistant Secretary 1/18/2001**  
 Daytime telephone (925) 210-9509

CR2E034 (10/00)