

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21499 (9)

1. Corporation Name

AMERICAN NETWORK LEASING CORPORATION

Principal Place of Business

5400 LEGACY DRIVE
PLANO, TX 75024

Mailing Address

5400 LEGACY DRIVE
H1 4A 66
PLANO, TX 75024-3105

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/27/1988

4. FEI Number

75-2124879

Applied For
Not Applicable

2. Principal Place of Business

21 Suite, Apt #, etc

2a. Mailing Address

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FLORIDA 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/T
NAME BUDDENDORF, B E
STREET ADDRESS 5400 LEGACY DRIVE
CITY - ST - ZIP PLANO, TX 75024 ☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition
000002836610-
-04/12/99 -01117-019
****150.00 ****150.00

TITLE V
NAME BENEDICTUS, MARK J
STREET ADDRESS 5400 LEGACY DRIVE
CITY - ST - ZIP PLANO, TX 75024 ☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE V/S
NAME O'BRYAN, MARK S
STREET ADDRESS 5400 LEGACY DRIVE
CITY - ST - ZIP PLANO, TX 75024 ☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE V
NAME PLASKETT, JACK
STREET ADDRESS 5400 LEGACY DRIVE
CITY - ST - ZIP PLANO, TX 75024 ☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE V
NAME PYLAND, BOB
STREET ADDRESS 5400 LEGACY DRIVE
CITY - ST - ZIP PLANO, TX 75024 ☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME AUTHORIZED AGENT
STREET ADDRESS BARTON, BARBARA
CITY - ST - ZIP 5400 LEGACY DRIVE
PLANO, TX 75024 ☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☒ Addition
972-605-1200

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Barbara Barton

AUTHORIZED AGENT