## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # **P21499** 1. Entity Name AMERICAN NETWORK LEASING CORPORATION OF NEVADA 03-20-2000 90131 040 \*\*\*150.00 Mailing Address Principal Place of Business 5400 LEGACY DR 5400 LEGACY DRIVE PLANO TX 75024 (H1 4A 66) PLANO TX 75024-3105 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 75-2124879 Not Applicable Country Country 7in \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST STE. 105 TALLAHASSEE FL 32301 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/99) Addition Change TITLE ☐ Delete TITLE KRENZ, SCOTT J. 5400 LEGACY DR NAME BUDDENDORF, B E NAME STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE CITY-ST-ZIP PLANO TX 75024 CITY-ST-ZIP **PLANO TX 75024** ☐ Change ☐ Addition TITLE ☐ Delete TITLE BENEDICTUS, MARK J NAME STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE CITY-ST-ZIP City-ST-7IP **PLANO TX 75024 X** Change ☐ Addition ☐ Delete TITLE TITLE HOWARD, DWAIN O'BRYAN, MARK S NAME NAME STREET ADDRESS 5400 LEGACY DR 5400 LEGACY DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-7IP **PLANO TX 75024** PLANO TX 75024 ☐ Delete ☐ Change ☐ Addition TITLE TITLE PLASKETT, JACK NAME NAME STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE CITY-ST-ZIP **PLANO TX 75024** CITY-ST-ZIP X Change ☐ Addition TITLE ☐ Delete TITLE CAPPS, MICHAEL V. NAME PYLAND, BOB NAME 5400 LEGACY DR STREET ADDRESS 5400 LEGACY DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **PLANO TX 75024** PLANO TX [ ] Change Addition ☐ Delete TITLE TITLE

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 ardress, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

NAME STREET ADDRESS

CITY-ST-ZIP

BARTON, BARBARA

5400 LEGACY DR

**PLANO TX 75024** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-00

<u>972-605-1200</u>

Daytime Phone #