2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # P26824** 1. Entig Name ONE CALL COMMUNICATIONS, INC. 04-30-2001 90409 008 ***150.00 Principal Place of Business Mailing Address 1202 W BUENA VISTA ROAD 1202 W BUENA VISTA ROAD **EVANSVILLE IN 47710 EVANSVILLE IN 47710** non4477492. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 35-1542850 Not Applicable Country Zip Country \$8.75. Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 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 11. 12. CEOD Change ☐ Addition TITLE □ Delete TITLE NAME DUNIGAN, LARRY NAME STREET ADDRESS STREET ADDRESS 1201 W. BUENA VISTA ROAD CITY-ST-ZIP CITY-ST-ZIP **EVANSVILLE IN** ☐ Addition TITLE STD ☐ Delete TITLE Change NAME BESING, GERALD NAME STREET ADDRESS 1201 W. BUENA VISTA ROAD STREET ADDRESS CITY-ST-ZIP EVANSVILLE:IN CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME PENCE, JOSEPH NAME STREET ADDRESS **801 CONGRESSIONAL BLVD** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CARMEL IN ☐ Delete TITLE Change ☐ Addition NAME BENGE, BRAD NAME STREET ADDRESS 801 CONGRESSIONAL BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CARMEL IN ☐ Addition TITLE Delete TITLE Change NAME DUNIGAN, DEREK NAME STREET ADDRESS 1202 W BUENA VISTA ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EVANSVILLE IN TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/20/01

(8/2) 429-1844

Daytime Phone #