

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90119 009 ***150.00

DOCUMENT # P93000041616

1. Entity Name

TELCO, INC.

Principal Place of Business

**1450 NW 1ST AVENUE
BOCA RATON FL 33432**

Mailing Address

**%COACH USA LAW DEPT.
ONE RIVERWAY, STE. 500
HOUSTON TX 77056**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0414033**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 **D** ☒ Delete
NAME **CUNNINGHAM, P R**
STREET ADDRESS **1450 NW 1ST AVENUE**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **ACS** ☐ Change ☒ Addition
NAME **Shayne Rosecrans**
STREET ADDRESS **One Riverway, Suite 500**
CITY-ST-ZIP **Houston, TX 77056**

TITLE **D** ☒ Delete
NAME **GADDIS, JESSE P**
STREET ADDRESS **221 W. OAKLAND PARK BLVD.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33302**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DVS** ☐ Delete
NAME **LONGO, ROBERT E**
STREET ADDRESS **1 RIVERWAY STE 500**
CITY-ST-ZIP **HOUSTON TX 77056**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **BURTWISTLE, LINDA**
STREET ADDRESS **1 RIVERWAY STE 500**
CITY-ST-ZIP **HOUSTON TX 77056**

TITLE **D** ☐ Change ☒ Addition
NAME **Linda Bell**
STREET ADDRESS **One Riverway, Suite 500**
CITY-ST-ZIP **Houston, TX 77056**

TITLE **DCEO** ☐ Delete
NAME **GALLAGHER, FRANK P**
STREET ADDRESS **1 RIVERWAY STE 500**
CITY-ST-ZIP **HOUSTON TX 77056**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **UPHAM, GREGORY**
STREET ADDRESS **1 RIVERWAY STE 500**
CITY-ST-ZIP **HOUSTON TX 77056**

TITLE **T** ☐ Change ☒ Addition
NAME **Stephanie Reyes**
STREET ADDRESS **One Riverway, Suite 500**
CITY-ST-ZIP **Houston, TX 77056**

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:

Shayne Rosecrans
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shayne Rosecrans

1-10-01
Date

713-888-0104
Daytime Phone #

CR2E034 (10/00)