DOCUMENT # P93000075166

1. Entity Name

DB TELCO, INC.

25 COUNTRY CLUB RD

STE 607

Mailing Address

P.O. BOX 7385 COUNTRY CLUB ROAD

05-05-2001 90411 001 *****8.75 05-05-2001 90411 002 ***150.00

GILFORD NH 03246 US			GILFORD NH 03247 US						188	18 8 1 191 1 001	
2. Principal F			3. Mailing Address								
	ntry Clu	ub Road	25 Country Club Road								
Suite, Apt.			Suite, Apt. #, etc.				DO NOT WRITE	IN THIS S	PACE		
Suite	<u>607 </u>		Suite 607								_
City & Stat	te		City & State				FEI Number 02-0410801		Ap	plied For]
Gilfor	d, NH _		Gilford, NH				·		No	t Applicable	7
Zip		Country	'		Country		Certificate of Status Desired	\vec{x}	8.75 Add	fitional]
_03249USA			03249	USA					ee Require		4
	6. Name	and Address of Current	Registered Agent	***********	No.	. 7. 1	Name and Address of New Rec	gistered A	gent		4
C T CORPORATION SYSTEM					Name .						
			Stroot A	ddress (P.O. F	Box Number is Not Acceptable)				┪		
	S PINE ISL		difect Address			uuless (1 .O. L	DOX NUMBER 18 NOT Acceptable)				ļ
PLAN	NTATION FL	33324									1
					City				Zip Code		1
								FL			╛
8. The above	named entity	submits this statement for	the purpose of changing its	register	ed office or	registered ag	ent, or both, in the State of Flori	da.			Ī
						•					1
SIGNATURE .											
oran marian.	Signature, typed o	or printed name of registered agent a	nd title if applicable. (NOT	E: Registere	d Agent signate	required when re	einstating)	DATE			1
9 This corpo	aration is aliait	ole to satisfy its Intangible	FILE NOW!	!! EEE	IS \$150 (n					1
	-	, .	After MAY 1, 20			10. Election Campaign Financing \$5.0			O May Be	ĺ	
Tax filing requirement and elects to do so. (See criteria on back)			Make Check Payable to Dep				Trust Fund Contribution.	L	Added	to Fees	ì
11.		OFFICERS AND I	<u>l</u>] DITIONS/CHANGES TO OFFIC	FRS AND I	DIRECTORS	S (N 11	┨
TITLE .	PD	OF TOLERS AND I	☐ Delete				DITIONS/OFFANGES TO OFFIC		☐ Change	Addition	1 3
NAME	DIBIASO, LAURENCE			NAME					Change	Addition	1 3
STREET ADDRESS	4 DD 4 4 5 4 DD										13
CITY-ST-ZIP					et address -st-zip						18
	D	TOTT THE BOLSO				<u> </u>		· 	(7) Chann	[] Addition	₹ }
TITLE NAME	SVENSON,	DΔV	☐ Delete	Delete TITLE NAME		Svenson	enson, Ray			Addition	15
STREET ADDRESS	Lance Carrie Communication and			B	140 DATE		iviera Drive				
CITY-ST-ZIP	[• · · · = = - · · · · · = · · · · · · · ·				-ST-ZIP						1
	AC					MCM DOTT					4_
'TITLE'	Deligie			TITLE			Nicholas F.	•	Change	Addition	1
NAME	PO BOX 651 N/A			NAM			ton Street				}
STREET ADORESS CITY-ST-ZIP	BOCA RATON FL				ET ADDRESS -ST-ZIP	Northville, MI 48167					
							TICY FIL 40107				∤
TITLE	VPST DIBIASO, DIANE			TITLE				_	□ Change	☐ Addition	1
NAME				NAM		The property of the second sec					1
	J				ET ADDRESS	S Kile i the company of the factor of the					}
CITY-ST-ZIP		JUN NH 03269	·	GHY	-ST-ZIP	<u>; ,</u>					1
TITLE	D D	DEDT F	☐ Delete			Mauk, G	uk, Gilbert E. 🛛 Change 🗌 Additi				
NAME					E	Freel Mont Corrigon Inc					1
1211 - 11111111111111111111111111111111					ET AUURESS	4250 East Camelback Road, Suite 300K			K	1	
					-ST-ZIP		, AZ 85018	., Jul.			1
TITLE			☐ Delete	TITLE		TIVELITY	1 270 OO 10	I	Change	☐ Addition	1
NAME				NAME							1
STREET ADDRESS					et address						-
CITY-ST-ZIP				CITY-	-ST-ZIP						
											1

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.

Diane P. DiBiaso, Vice President 4/23/01 603-524-6133

Daytime Phone #