

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000103021

1. Entity Name

MOBILE AREA NETWORKS, INC.

Principal Place of Business

1275 LAKE HEATHROW LANE STE. 115  
HEATHROW FL 32746

Mailing Address

1275 LAKE HEATHROW LANE STE. 115  
HEATHROW FL 32746

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3482752

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LEONE, JAMES R  
1275 LAKE HEATHROW LANE STE. 115  
HEATHROW FL 32746

7. Name and Address of New Registered Agent

Name JERALD R. HOEFT

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

1275 LAKE HEATHROW LANE, STE 115

City HEATHROW

FL

Zip Code 32746

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

TITLE DP  
NAME WIMBISH, GEORGE ☐ Delete  
STREET ADDRESS 1275 LAKE HEATHROW LANE STE. 115  
CITY-ST-ZIP HEATHROW FL 32746

TITLE DV  
NAME GOOD, ROBERT ☐ Delete  
STREET ADDRESS 1275 LAKE HEATHROW LANE STE. 115  
CITY-ST-ZIP HEATHROW FL 32746

TITLE DS ☒ Delete  
NAME LEONE, JAMES R  
STREET ADDRESS 1275 LAKE HEATHROW LANE STE. 115  
CITY-ST-ZIP HEATHROW FL 32746

TITLE D ☐ Delete  
NAME GRAHAM, RUSSELL M  
STREET ADDRESS 1275 LAKE HEATHROW LANE STE 115  
CITY-ST-ZIP HEATHROW FL 32746

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE VT ☒ Change ☐ Addition  
NAME JERALD R. HOEFT  
STREET ADDRESS 1275 LAKE HEATHROW LANE, STE 115  
CITY-ST-ZIP HEATHROW FL 32746

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
May 04, 2001 8:00 am  
Secretary of State

05-04-2001 90014 005 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)