2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 28, 2005 8:00 am **Secretary of State** DOCUMENT # P97000103021 1. Entity Name 02-28-2005 90197 010 ***150.00 MOBILE AREA NETWORKS, INC. Principal Place of Business Mailing Address 2772 DEPOT STREET 2772 DEPOT STREET SANFORD FL 32773 SANFORD FL 32773 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 59-3482752 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOERT, JERALD R Street Address (P.O. Box Number is Not Acceptable) 2772 DEPOT STREET SANFORD FL 32773 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DP TITLE ☐ Detete TITLE Change ☐ Addition WIMBISH, GEORGE NAME NAME 2772 DEPOT STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP SANFORD FL 32773 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MAULT, DANIEL L STREET ADDRESS 2772 DEPOT STREET STREET ADDRESS CITY-ST-7IP SANFORD FL 32773 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME HOEFT, JERALD R NAME 2772 DEPOT STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANFORD FL 32773 CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NETTUNO, JEROME L NAME NAME 2772 DEPOT STREET STREET ADDRESS STREET ADDRESS SANFORD FL 32773 CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete TITLE ☐ Change ☐ Addition SAVANT, NOAH V NAME 2772 DEPOT STREET STREET ADDRESS STREET ADDRESS SANFORD FL 32773 CITY-ST-ZIP CITY-ST-ZIP **VS** TITLE ☐ Delete TITLE Сhange ☐ Addition WIMBISH, JUDY D NAME NAME STREET ADDRESS 2772 DEPOT STREET STREET ADDRESS SANFORD FL 32773

12. Thereby 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 truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a

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SIGNATURE:

CITY-ST-7IP

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