FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 01, 2001 8:00 am DOCUMENT # P99000063165 **Secretary of State** THE REAL PUBLIC TELEPHONE COMPANY 05-01-2001 90079 033 \*\*\*150.00 Principal Place of Business Mailing Address 3599 W LAKE MARY BLVD. 3599 W LAKE MARY BLVD. STE E STE E LAKE MARY FL 32746 LAKE MARY FL 32746 2. Principal Place of Business 3. Mailing Address 393 Gi/ston Suite, Apt. #, etc. 393 Gilston Ct. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3587741 Heathrow Not Applicable Semino/ \$8.75 Additional 5. Certificate of Status Desired 32746 Seminole Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Elder PANZL, JOSEPH R ESQ. Street Address (P.O. Box Number is Not Acceptable 393 6//5/04 C/ 111 N. ORANGE AVE., STE. 900 ORLANDO FL 32801 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. gent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) ☐ Delete TITLE TITLE RIPPER, ELDER N NAME 393 Gilston Ct. Heathow FL 32746 STREET ADDRESS STREET ADDRESS 3599 W LAKE MARY BLVD, STE E CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 TITLE Delete TITLE PANZL, JOSEPH R NAME NAME STREET ADDRESS STREET ADDRESS 3599 W LAKE MARY BLVD, STE E CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 ☐.Delete Addition TITLE. 393 Gilston Ct. Heathur FC 32746 RIPPER, ELDER N NAME STREET ADDRESS 3599 W LAKE MARY BLVD, STE E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 Delete Change TITLE TITLE Addition PANZL, JOSEPH R NAME NAME STREET ADDRESS STREET ADDRESS 3599 W LAKE MARY BLVD. STE E CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 Change ☐ Addition TITLE □ Delete TITLE 393 Gilston Ct. Heathow PC 32746 RIPPER, ELDER N NAME NAME 3599 W LAKE MARY BLVD STE E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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