

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 20, 2000 8:00 am  
Secretary of State

04-20-2000 90039 030 \*\*\*150.00

DOCUMENT # P99000081467

1. Entity Name

SOURCE ONE COMMUNICATIONS, INC.

Principal Place of Business

2320-B N. MONROE ST.  
TALLAHASSEE FL 32303

Mailing Address

2320-B N. MONROE ST.  
TALLAHASSEE FL 32303-4734

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

59-3597709

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HOLMAN, JOHN  
2320-B N. MONROE ST.  
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

John Hohman

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

2320-B N. Monroe St.

City Tallahassee

FL

32303

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, 2000 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP President/Treasurer ☐ Change ☒ Addition  
John Hohman  
2320-B N. Monroe St.  
Tallahassee, Florida 32303

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP Vice Pres./Secretary ☐ Change ☒ Addition  
Brad Burns  
2320-B N. Monroe St.  
Tallahassee, Florida 32303

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP Vice-President ☐ Change ☒ Addition  
John Jenkins  
2320-B N. Monroe St.  
Tallahassee, Florida 32303

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

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

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

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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John R. Jenkins

Date

4/14/00

Daytime Phone #

850-877-6555

CR2E034 (9/99)