

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90052 042 ***150.00

DOCUMENT # S81846

1. Entity Name
CHOICE COMMUNICATIONS, INC.



Principal Place of Business
**2400 SOUTH PL AVE
LAKELAND FL 33803
US**

Mailing Address
**2400 SOUTH PL AVE
LAKELAND FL 33803
US**

2. Principal Place of Business
2420 SOUTH PL AVE
Suite, Apt. #, etc.

3. Mailing Address
2420 SOUTH PL AVE
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
LAKELAND
Zip
33803

Country
POLK

City & State
LAKELAND
Zip
33803

Country
POLK

4. FEI Number **59-3081888**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BIRMINGHAM, TERRY L.
4319 CREEK CT
LAKELAND FL 33811**

7. Name and Address of New Registered Agent

Name **MICHAEL C. BIRMINGHAM**
Street Address (P.O. Box Number is Not Acceptable)
4319 CREEK CT.
City **LAKELAND** FL Zip Code **33811**

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 *Michael C. Birmingham*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-6-03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **VP** ☐ Delete
NAME **BIRMINGHAM, MICHAEL C**
STREET ADDRESS **4319 CREEK CT**
CITY-ST-ZIP **LAKELAND FL 33811**

TITLE **P** ☒ Delete
NAME **BIRMINGHAM, TERRY LYNN**
STREET ADDRESS **4319 CREEK CT**
CITY-ST-ZIP **LAKELAND FL 33811**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **MICHAEL C. BIRMINGHAM**
STREET ADDRESS **4319 CREEK CT.**
CITY-ST-ZIP **LAKELAND FL 33811**

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael C. Birmingham*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-03
Date
863-687-2500
Daytime Phone #

CR2E034 (10/02)