

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S89009

1. Entity Name

PREMIERE COMMUNICATIONS, INC.

**FILED**  
**Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90043 011 \*\*\*150.00

Principal Place of Business

Mailing Address

3399 PEACHTREE RD. N.E.  
SUITE 400  
ATLANTA GA 30326

3399 PEACHTREE RD. N.E.  
SUITE 400  
ATLANTA GA 30326-1149

2. Principal Place of Business

3399 Peachtree RD NE 600

Suite, Apt. #, etc.

Suite 600

City & State

Atlanta, GA

Zip

30326

Country

USA

3. Mailing Address

3399 Peachtree RD NE 600

Suite, Apt. #, etc.

Suite 600

City & State

Atlanta, GA

Zip

30326

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3090113

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEMS  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

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

City

FL

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.

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete  
NAME ALLRED, JEFFREY A  
STREET ADDRESS 3399 PEACHTREE ROAD, SUITE 600  
CITY-ST-ZIP ATLANTA GA 30326

TITLE DCEO ☐ Change ☒ Addition  
NAME ALLRED, JEFFREY A  
STREET ADDRESS 3399 PEACHTREE ROAD, SUITE 600  
CITY-ST-ZIP ATLANTA, GA 30326

TITLE DCEO ☐ Delete  
NAME JONES, BOLAND T  
STREET ADDRESS 3399 PEACHTREE ROAD NE, SUITE 600  
CITY-ST-ZIP ATLANTA GA 30326

TITLE DCEO ☐ Change ☒ Addition  
NAME JONES, BOLAND T  
STREET ADDRESS 3399 PEACHTREE ROAD, SUITE 600  
CITY-ST-ZIP ATLANTA, GA 30326

TITLE EVP ☒ Delete  
NAME WAGNER, HARVEY A  
STREET ADDRESS 3399 PEACHTREE ROAD NE, SUITE 600  
CITY-ST-ZIP ATLANTA GA 30326

TITLE P ☒ Change ☒ Addition  
NAME ABERNATHY, ELIZABETH W.  
STREET ADDRESS 3399 PEACHTREE ROAD, SUITE 600  
CITY-ST-ZIP ATLANTA, GA 30326

TITLE DSV ☐ Delete  
NAME JONES, PATRICK G  
STREET ADDRESS 3399 PEACHTREE ROAD NE, SUITE 600  
CITY-ST-ZIP ATLANTA GA 30326

TITLE DEV ☐ Change ☒ Addition  
NAME JONES, PATRICK G.  
STREET ADDRESS 3399 PEACHTREE ROAD, SUITE 600  
CITY-ST-ZIP ATLANTA, GA 30326

TITLE T ☒ Delete  
NAME GORLAND, RONALD K  
STREET ADDRESS 3399 PEACHTREE ROAD NE, SUITE 600  
CITY-ST-ZIP ATLANTA GA 30326

TITLE T ☒ Change ☐ Addition  
NAME STEIN, CHRISTOPHER J  
STREET ADDRESS 3399 PEACHTREE ROAD, SUITE 600  
CITY-ST-ZIP ATLANTA, GA 30326

TITLE ☐ Delete  
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

Patrick G. Jones 4/1/00 404.262.8400

Date

Daytime Phone #

CR2E034 (9/99)