

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90129 007 ***550.00

DOCUMENT # F01000004754

1. Entity Name
WORLDCATCH, INC.

Principal Place of Business
2100 NORTH PACIFIC STREET, SUITE 200
SEATTLE WA 98103 WorldCatch, Inc
new: → 2110 N Pacific St Ste 103
 Seattle, WA 98103

Mailing Address
2100 NORTH PACIFIC STREET, SUITE 200
SEATTLE WA 98103



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2110 North Pacific Street

3. Mailing Address
Same

Suite, Apt. #, etc.
Suite 103

Suite, Apt. #, etc.

City & State
Seattle, WA

City & State

4. FEI Number **91-2007151** Applied For
 Not Applicable

Zip **98103** Country **USA**

Zip Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00 ✓
After September 13, 2002 Fee will be \$750.00
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	VD	<input checked="" type="checkbox"/> Delete
NAME	POOLE, THOMAS W	
STREET ADDRESS	2100 NORTH PACIFIC STREET, SUITE 200	
CITY-ST-ZIP	SEATTLE WA 98103	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	HILGER, JAMES K	
STREET ADDRESS	2100 NORTH PACIFIC STREET, SUITE 200	
CITY-ST-ZIP	SEATTLE WA 98103	
TITLE	V	<input type="checkbox"/> Delete
NAME	KATZMAN, VAN	
STREET ADDRESS	2100 NORTH PACIFIC STREET, SUITE 200	
CITY-ST-ZIP	SEATTLE WA 98103	
TITLE	V	<input type="checkbox"/> Delete
NAME	FIORILLO, JOHN	
STREET ADDRESS	2100 NORTH PACIFIC STREET, SUITE 200	
CITY-ST-ZIP	SEATTLE WA 98103	
TITLE	D	<input type="checkbox"/> Delete
NAME	ERICSON, BILL	
STREET ADDRESS	505 5TH AVENUE SOUTH, SUITE 610	
CITY-ST-ZIP	SEATTLE WA 98104	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STRASER, ERIK	
STREET ADDRESS	2775 SAND HILL ROAD, SUITE 240	
CITY-ST-ZIP	MENLO PARK CA 94025	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E034 (4/02)