

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90011 014 ***150.00

0604885

DOCUMENT # P19202

1. Entity Name

PACTEL FINANCE, INC.

Principal Place of Business

Mailing Address

175 E HOUSTON ST
RM 8-4-60
SAN ANTONIO TX 76205
US

175 E HOUSTON
RM. 8-H-60
SAN ANTONIO TX 78205

2. Principal Place of Business
175 EAST HOUSTON

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

ROOM 8-H-60

City & State

SAN ANTONIO, TX

City & State

4. FEI Number

94-2942781

Applied For

Not Applicable

Zip

Country

78205

US

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

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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, 2001 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: **PCEO** Delete
NAME: **ROGER W WOHLERT**
STREET ADDRESS: **175 E HOUSTON, RM 7-B-80**
CITY-ST-ZIP: **SAN ANTONIO TX 78205**

TITLE: _____ Change Addition
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: _____ Delete
NAME: **VP/S WAYNE A WIRTZ**
STREET ADDRESS: **175 E HOUSTON, RM 1214**
CITY-ST-ZIP: **SAN ANTONIO TX 78205**

TITLE: **VP/SECRETARY/DIRECTOR** Change Addition
NAME: **WAYNE A. WIRTZ**
STREET ADDRESS: **175 E. HOUSTON, ROOM 206**
CITY-ST-ZIP: **SAN ANTONIO, TX 78205**

TITLE: **VP** Delete
NAME: **WILLIAM M MILLER**
STREET ADDRESS: **2600 CAMINO RAMON**
CITY-ST-ZIP: **SAN RAAMON CA 94583**

TITLE: **ASSISTANT SECRETARY** Change Addition
NAME: **JOHN B. GIBSON**
STREET ADDRESS: **175 E. HOUSTON, ROOM 232**
CITY-ST-ZIP: **SAN ANTONIO, TX 78205**

TITLE: _____ Delete
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: **ASSISTANT TREASURER** Change Addition
NAME: **TIM M. SCHNEIDER**
STREET ADDRESS: **175 E. HOUSTON, ROOM 7-S-05**
CITY-ST-ZIP: **SAN ANTONIO, TX 78205**

TITLE: _____ Delete
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: **ASSISTANT TREASURER** Change Addition
NAME: **MICHAEL D. WAGNER**
STREET ADDRESS: **175 E. HOUSTON, ROOM 7-U-30**
CITY-ST-ZIP: **SAN ANTONIO, TX 78205**

TITLE: _____ Delete
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: **DIRECTOR** Change Addition
NAME: **DONALD E. KIERNAN**
STREET ADDRESS: **175 E. HOUSTON, ROOM 1307**
CITY-ST-ZIP: **SAN ANTONIO, TX 78205**

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: _____

ROGER W. WOHLERT

4-2-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)