

## **Supplemental Application Data Sheet**

### **Application Information**

Application number:: 13/454,738  
Filing Date:: 04/24/12  
Application Type:: Regular  
Subject Matter:: Utility  
Title:: MULTIMODE ANTENNA STRUCTURE  
Attorney Docket Number:: SCJ-00203  
Small Entity?:: Yes

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name:: T.  
Family Name:: Montgomery  
City of Residence:: Melbourne Beach  
State or Province of Residence:: FL  
Country of Residence:: US  
Street of mailing address:: 515 Sunset Boulevard  
City of mailing address:: Melbourne Beach  
State or Province of mailing address:: FL  
Postal or Zip Code of mailing address:: 32951

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Frank  
Middle Name:: M.  
Family Name:: Caimi  
City of Residence:: Vero Beach  
State or Province of Residence:: FL  
Country of Residence:: US  
Street of mailing address:: 6550 Martinique Way  
City of mailing address:: Vero Beach  
State or Province of mailing address:: FL  
Postal or Zip Code of mailing address:: 32967

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name:: W.  
Family Name:: Kishler  
City of Residence:: Rockledge  
State or Province of Residence:: FL  
Country of Residence:: US

Street of mailing address:: 459 Wynfield Circle  
 City of mailing address:: Rockledge  
 State or Province of mailing address:: FL  
 Postal or Zip Code of mailing address:: 32955

**Correspondence Information**

Correspondence Customer Number:: 25181

**Representative Information**

Representative Customer Number:: 25181

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	12/750196	03/30/10
12/750196	Continuation of	12/099320	04/08/08
<u>12/099320</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/916655</u>	<u>05/08/07</u>
<u>12/099320</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/925394</u>	<u>04/20/07</u>
12/099320	Continuation-in-part of	11/769565	06/27/07
11/769565	An application claiming the benefit under 35 USC 119(e)	60/925394	04/20/07
11/769565	An application claiming the benefit under 35 USC 119(e)	60/916655	05/08/07

**Assignee Information**

Assignee name:: SkyCross, Inc.  
Street of mailing address:: 7341 Office Park Place  
Suite 102  
City of mailing address:: Viera  
State or Province of mailing address:: FL  
Postal or Zip Code of mailing address:: 32940