									·
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						FILED			
COR	PROFIT RPORATION		FLORIDA DEPARTM			Mar 19	199	8 8:0	00an
	JAL REPORT 1998		Secretary of DIVISION OF COR			Secre	tary	of S	tate
DOCUI 1. Corporation	MENT #	544974	(9)						
EATON	N COMMUNICA	ATIONS, INC.			1				
					1				
Principal Place	e of Business		Mailing Address		$\overline{}$	I K urui bi nin bibar bibar 1997 in	joir bier eieri bi	All Dight blair bid	.OF DIDIN IDEA
116-8-MON			116 S. MONROE STREET P. O. BOX 1713						
TALLAHASSE			TALLAHASSEE FL 32301				RITE IN THIS	SPACE	
		a contravada e e e e e e e e e e e e e e e e e e				3. Date Incorporated or Qualif 09/12/1977	ied		
2. Principal Pl 21 ⊋15	Place of Business S. Mano		26. Mailing Address 26. P.O. Box	1713		4. FEI Number 59-1763485		- 1	oplied For ot Applicable
Suite, Apt.	k 500		Suite, Apt. #, etc.			5. Certificate of Status Desired	s 🗆	\$8.75 A	Additional
City & State	lahassee	. PZ .	City & State Tallahasse	· FL		Election Campaign Financia Trust Fund Contribution	ng 🖂	\$5.00 Added t	
7.0	T C.	ountry	Zip	Country		8. This corporation owes or ha			
24 27 323		US A 2	29 3230 Z 30) USA_		Personal Property Tax due 10. Name and Address of New] No
EA	ATON, JAMES E	udiess of Content in	gistored Agent	81 Name			, linking.	- Ryon	
11	IB S. MONROE S		(P.O. Box Number is Not Acce	eptable)					
TALLAHASSEE FL 32301				83 /	<u> </u>	5. Monroe St	reet		
				84 City -	uite	500		les Zin (Code
				1.1.	TW	llahassee	<u>Fl</u>	_ 3	2361
11. Pursuant i office or ri agent. Lai	to the provisions of egistered agent, or im familiar with, and	Sections 607.0502 and both, in the State of Flat accept the obligation	d 607.1508, Florida Statutes, lorida Such change was aut Section 607.0505, Florid	the above-named of horized by the corp ta Statutes.	corpora poration	ation submits this statement for 's board of directors. I hereby a	the purpose of accept the ap	of changing its pointment as	s registered registered
SIGNATURE	Signature, typed or poole	id name of restricted again and	MATER INOTE: F	Registered Agent signature	a required w	vhen reinstaling)	DATE		
12.		OFFICERS AND DI	RECTORS	13.	T	ADDITIONS/CHANGES TO C)FFICERS AN		
TITLE NAME	DVST Edenfield, i	MARTHA	DELETE	1.1 TITLE 1.2 NAME				L Change	Addition
STREET ADDRESS	116 S. MONF	roe st.		1.3 STREET ADDRESS					
CITY-ST-ZIP	TALLAHASSE	E FL 32301		1.4 CITY-ST-ZIP	<u> </u>			EZI ÓLMAN	T a deligion
TITLE	PD Eaton, Jami	E E	☐ DELETE	2.1 TITLE			- .		Addition
NAME STREET ADDRESS	116 S. MONF			2.2 NAME 2.3 STREET ADDRESS	219	s S. Monroe	Street	, Suit	c >00
CITY-ST-ZIP	TALLAHASSE			2.4 CITY+ST-ZIP					
TITLE			DELETE	3.1 TITLE				Change	Addition
NAME	1			3.2 NAME					
STREET ADORESS CITY-ST-ZIP				3.3 STREET ADDRESS 3.4. CITY-ST-ZIP					
TITLE	 	talika akada derirak diakata 1, 1, 1, 1, 1, 1, ka ta 1, 1, 1	DELETE	4.1 TiTLE	 			Change	Addition
NAME	1		1	4. 2 NAME					
STREET ADDRESS	1		1	4.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	 		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	 			☐ Change	Addition
NAME	1			5.2 NAME					
STREET ADDRESS	1			5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 City-ST-ZIP					2 4 4741
TITLE			DELETE	6.1 TITLE				Change	Addition
NAME	1		,	6.2 NAME	1				

6.3 STREET ADDRESS

64 CITY-ST-ZIP

14. I horeby 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 annual report or supplemental annual 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STREET ADDRESS