

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 17, 1999 8:00 am
Secretary of State

08-17-1999 90004 018 ***550.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # **F98000006431**

1. Corporation Name
TELCO SYSTEMS, INC.



Principal Place of Business Mailing Address
945 EAST PACES FERRY RD., STE. 2240 ATLANTA GA 30326

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 21 **63 Nahatan Street** 26
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 27
 City & State City & State
 23 **Norwood, MA** 28
 Zip Country Zip Country
 24 **02062** 25 **USA** 29 30

3. Date Incorporated or Qualified
11/24/1998
 4. FEI Number Applied For
APPLIED FOR 58-2425520
 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property. Yes No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE DC	<input checked="" type="checkbox"/> DELETE
NAME ODOM, STEVEN A	
STREET ADDRESS 945 EAST PACES FERRY RD., STE. 2240	
CITY-ST-ZIP ATLANTA GA 30326	
TITLE DP	<input checked="" type="checkbox"/> DELETE
NAME WEST, HENSLEY E	
STREET ADDRESS 945 EAST PACES FERRY RD., STE. 2240	
CITY-ST-ZIP ATLANTA GA 30326	
TITLE DVT	<input type="checkbox"/> DELETE
NAME GERGEL, MARK A	
STREET ADDRESS 945 EAST PACES FERRY RD., STE. 2240	
CITY-ST-ZIP ATLANTA GA 30326	
TITLE S	<input checked="" type="checkbox"/> DELETE
NAME KIDDER, MARTIN D	
STREET ADDRESS 945 EAST PACES FERRY RD., STE. 2240	
CITY-ST-ZIP ATLANTA GA 30326	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME John D. Phillips	
1.3 STREET ADDRESS 945 E. Paces Ferry Road, Ste. 2210	
1.4 CITY-ST-ZIP Atlanta, GA 30326	
2.1 TITLE Chm., CEO, Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME A. Lindsay Wallace	
2.3 STREET ADDRESS 945 E. Paces Ferry Road, Ste. 2210	
2.4 CITY-ST-ZIP Atlanta, GA 30326	
3.1 TITLE President, Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME David LeBeau	
3.3 STREET ADDRESS 63 Nahatan St.	
3.4 CITY-ST-ZIP Norwood, MA 02062	
4.1 TITLE Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME W. Tod Chnar	
4.3 STREET ADDRESS 945 E. Paces Ferry Road, Ste. 2210	
4.4 CITY-ST-ZIP Atlanta, GA 30326	
5.1 TITLE Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME Michael Mies	
5.3 STREET ADDRESS 945 E. Paces Ferry Rd., Ste. 2210	
5.4 CITY-ST-ZIP Atlanta, GA 30326	
6.1 TITLE Vice President, Dir.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME Mark Gergel	
6.3 STREET ADDRESS 945 E. Paces Ferry Road, Ste. 2210	
6.4 CITY-ST-ZIP Atlanta, GA 30326	

14. 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 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 empowered 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: *David LeBeau* **Aug. 9, 1999** 781-255-2258

CR2E034 (5/99)

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Led 385-90004-18

Telco Systems, Inc.
1999 Profit Corporation Annual Report

Document # F98000006431

Block 13. Additions to Officers and Directors

Assistant Secretary
David Garrity
63 Nahatan Street
Norwood, MA 02062