2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2009
Secretary of State

DOCUMENT# H01979

Entity Name: TELEPHONE SUPPORT SYSTEMS OF FLORIDA, INC.

Current Principal Place of Business:

6310-1 TECHSTER BLVD
FORT MYERS, FL 33966 US

New Principal Place of Business:

Current Mailing Address:

6310-1 TECHSTER BLVD
FORT MYERS, FL 33966 US

New Mailing Address:

FEI Number: 59-2411756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WAUGH, LILLIAN A
6310-1 TECHSTER BOULEVARD
FORT MYERS, FL 33966 US

Name and Address of New Registered Agent:

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: LILLIAN WAUGH

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COLEMAN, HAZEL MS
Address: 4306 15TH STREET WEST
City-St-Zip: LEHIGH, FL 33971

Title: P ( ) Delete
Name: FULTON, A N
Address: 11658 TIMBERLINE CIRCLE
City-St-Zip: FT MYERS, FL 33912

Title: VP-D ( ) Delete
Name: BRAST, JAMES J
Address: 3575 FIELDVIEW AVENUE
City-St-Zip: WEST BLOOMFIELD, MI 48324

Title: ST ( ) Delete
Name: WAUGH, LILLIAN A
Address: 1457 CHARMONT PLACE
City-St-Zip: FORT MYERS, FL 33919

Title: CEOD ( ) Delete
Name: ROTH, RANDALL G
Address: 5806 KING JAMES LANE
City-St-Zip: WATERFORD, MI 48327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COLEMAN, HAZEL MS
Address: 18444 FUSCHIA ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILLIAN WAUGH ST 10/06/2009

Electronic Signature of Signing Officer or Director Date