FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # J06303 (8)SUNCOAST/EASYCOM, INC. Principal Place of Business Mailing Address 2006-A EUGENIA AVE 2606-A EUGENIA AVE P O BOX 291201 P O BOX 291201 NASHVILLE TN 37229 NASHVILLE TN 37229-1201 3a. Date of Last Report 3. Date Incorporated or Qualified 03/27/1986 06/18/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 62-1276370 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MUNCE, G.M. **641 BRYN MAWR STREET** 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32804 R3 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 affect 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. Lam familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. Stars rate, typied or protect rance of registeral agent and the diapplicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition ΡĎ Change DELETE 1.1 1066 TILLE ALAN, RAY 1.2 NAME NAME 2606-A EUGENIA AVE 1.3 STREET ADDRESS STREET ADORESS **NASHVILLE TN** 1.4 CITY - ST - ZIP CITY - S1 - 2/P Change VSD DELETE Addition THILE 21.1011.6 JUIN, SHUEA E. 2.2 NAME 2606-A EUGENIA AVE STREET ADDRESS 2.3 STREET ADDRESS NASHVILLE TN 2. 4 CITY - ST - ZIP 017Y-ST-2IP DELETE Change Addition 3 1 TITLE TITLE BATAILLER, E.L. 3.2 NAME NAME 2606 EUGENIA STREET ADDRESS 3.3 STREET ADDRESS NASHVILLE TN 3.4. CITY-ST-ZIP CITY - \$1 - 749 DELETE Change Addition 41 TITLE THE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY ST-ZIF DELETE 5.1 TITLE Addition THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHY-51-2IP DELETE Change Addition 6.1 TITLE THEFT NAME 6.2 NAME STREET ADORESS 6 3 STREET ADDRESS

14. To hereby certify that the information supplies 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 armual 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.

64 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 03 1997 8:00am

Secretary of State