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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000103550 (5)

1. Corporation Name
RECOURSE COMMUNICATIONS, INC.



Principal Place of Business

1655 PALM BEACH LAKES BLVD.
SUITE 600
W. PALM BEACH FL 33401

Mailing Address

1655 PALM BEACH LAKES BLVD.
SUITE 600
W. PALM BEACH FL 33401-2225

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

12/26/1996

3a. Date of Last Report

4. FEI Number

04-2906741

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

MATARESE, PAT D
1655 PALM BEACH LAKES BLVD.
SUITE 600
W. PALM BEACH FL 33401

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MOORE, MICHAEL
STREET ADDRESS 1655 PALM BEACH LAKES BLVD., SUITE 600
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE D
NAME MOORE, SAMANTHA
STREET ADDRESS 1655 PALM BEACH LAKES BLVD., SUITE 600
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE D
NAME MATARESE, PAT
STREET ADDRESS 1655 PALM BEACH LAKES BLVD., SUITE 600
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE D
NAME O'HARA, B. JAMES
STREET ADDRESS 1655 PALM BEACH LAKES BLVD., SUITE 600
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: Pat Matarese

PAT MATARESE

4-22-87

661-681-1880

CR2E034 (9/96)