

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 APR 19 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995
FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S19772 (0)
1. Corporation Name
TELADVANTAGE AMERICA, INC.

Principal Place of Business Mailing Address
188 CORPORATE SQUARE DR. SUITE 185 LONGWOOD FL 32750
188 CORPORATE SQUARE DR. SUITE 185 LONGWOOD FL 32750

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date Incorporated or Qualified 12/17/1990 3a. Date of Last Report 02/22/1994
4. FEI Number 59-3037918 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
BAKER, J. BOYD
188 CORPORATE SQUARE DR.
SUITE 185
LONGWOOD FL 32750

10. Name and Address of New Registered Agent
81 Name Robert H. Scott, Jr.
82 Street Address (P.O. Box Number is Not Acceptable) 152 W. Granada Blvd.
83
84 City Ormond Beach FL 85 Zip Code 32174

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] DATE 1/18/95
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS
TITLE D
NAME KRUSE, KEN
STREET ADDRESS 1991 CORPORATE SQ DR, STE 165
CITY - ST - ZIP LONGWOOD FL
TITLE D
NAME BAKER, J. BOYD
STREET ADDRESS 188 CORPORATE SQ DR, STE 185
CITY - ST - ZIP LONGWOOD FL
TITLE D
NAME WILHELM, GREG
STREET ADDRESS 1991 CORPORATE SQ DR, STE 165
CITY - ST - ZIP LONGWOOD FL
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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 Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE Change Addition
2.2 NAME DeVORE, DAVE
2.3 STREET ADDRESS 1991 CORPORATE SQR DR, STE 165
2.4 CITY - ST - ZIP LONGWOOD, FL
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, unchanged, or on an appointment with an address.
SIGNATURE: [Signature] DATE 1/20/95 407 827-3408
KEN KRUSE