

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 444410 (5)
1. Corporation Name
DIAL COMMUNICATIONS, INC.

Principal Place of Business 180 CAPITAL CIRCLE SW P.O. BOX 10017 TALLAHASSEE FL 32302	Mailing Address 180 CAPITAL CIRCLE SW P.O. BOX 10017 TALLAHASSEE FL 32302
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4972 Woodville Hwy. Bldg. 4 Suite, Apt. #, etc. 22 P.O. Box 10017 City & State 23 Tallahassee, FL Zip 24 32311		2a. Mailing Address 26 1601 Forum Pl. Suite, Apt. #, etc. 27 Ste. 1110 City & State 28 West Palm Beach, FL Zip 29 33401		3. Date Incorporated or Qualified 01/17/1974	
25 U.S.A.		30 U.S.A.		4. FEI Number 59-1511395	
9. Name and Address of Current Registered Agent EASTWOOD, SANDRA K 180 CAPITAL CIR SW P O BOX 10017 TALLAHASSEE FL 32131		10. Name and Address of New Registered Agent 81 Name Frazier L. Gaines 82 Street Address (P.O. Box Number is Not Acceptable) 1601 Forum P. 83 Ste. 1110 84 City West Palm Beach FL 85 Zip Code 33401		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE Frazier L. Gaines Frazier L. Gaines, Chairman 3/19/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POWERS, JOSEPH P	1.2 NAME	
STREET ADDRESS	180 CAPITAL CIR SW	1.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORRIS, LARRY	2.2 NAME	
STREET ADDRESS	180 CAPITAL CIR SW	2.3 STREET ADDRESS	4972 Woodville Hwy., Bldg. 4
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP	Tallahassee, FL 32311
TITLE	ST	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSBORNE, DANIEL	3.2 NAME	
STREET ADDRESS	1801 FORUM PLACE #1110	3.3 STREET ADDRESS	Ray, Billy V.
CITY-ST-ZIP	W PALM BCH FL	3.4 CITY-ST-ZIP	1601 Forum Pl., Ste. 1110
TITLE	CD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MERCURIO, WILLIAM	4.2 NAME	
STREET ADDRESS	1801 FORUM PL #1110	4.3 STREET ADDRESS	Gaines, Frazier L.
CITY-ST-ZIP	W PALM BCH FL	4.4 CITY-ST-ZIP	1601 Forum Pl., Ste. 1110
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: Frazier L. Gaines Frazier L. Gaines, Chairman 3/19/98 (561) 688-0400

CR2E034 (10/97)