

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

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Mar 07 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 # 642759 (5)

1. Corporation Name:  
ANSWERITE METRO COMMUNICATIONS, INC.

Principal Place of Business Mailing Address  
401 W FAIRBANKS AVE. WINTER PARK, FL 401 W FAIRBANKS AVE. WINTER PARK, FL  
PO BOX 3300 PO BOX 3300  
ORLANDO FL 32802 ORLANDO FL 32802-3300



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

3. Date Incorporated or Qualified 10/24/1979 3a. Date of Last Report 05/10/1996  
4. FEI Number 59-1949101 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 10. Name and Address of New Registered Agent  
SMITH, EDWARD C 81 Name  
401 WEST FAIRBANKS KAVE. 82 Street Address (P.O. Box Number is Not Acceptable)  
WINTER PARK FL 32789 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 (NOTE: Registered Agent signature required when re-stating) DATE

| 12. OFFICERS AND DIRECTORS |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                 |
|----------------------------|--|---|-----------------|
| TITLE                      | DP<br>SMITH, EDWARD C.<br>401 WEST FAIRBANKS KAVE.<br>WINTER PARK FL | 1.1 TITLE   | Change Addition |
| NAME                       |  | 1.2 NAME  |                 |
| STREET ADDRESS             |  | 1.3 STREET ADDRESS                                    |                 |
| CITY - ST - ZIP            |  | 1.4 CITY - ST - ZIP                                   |                 |
| TITLE                      | DV<br>COSMO, SAMUEL DR.<br>336 HILLMAN AVE.<br>ORLANDO FL            | 2.1 TITLE   | Change Addition |
| NAME                       |  | 2.2 NAME  |                 |
| STREET ADDRESS             |  | 2.3 STREET ADDRESS                                    |                 |
| CITY - ST - ZIP            |  | 2.4 CITY - ST - ZIP                                   |                 |
| TITLE                      | DS<br>JONES, CYNTHIA M.<br>645 E. CONCORD STREET<br>ORLANDO FL       | 3.1 TITLE   | Change Addition |
| NAME                       |  | 3.2 NAME  |                 |
| STREET ADDRESS             |  | 3.3 STREET ADDRESS                                    |                 |
| CITY - ST - ZIP            |  | 3.4 CITY - ST - ZIP                                   |                 |
| TITLE                      | DV<br>JOHNSON, EDWIN K<br>414 E PINE ST #1211<br>ORLANDO FL          | 4.1 TITLE   | Change Addition |
| NAME                       |  | 4.2 NAME  |                 |
| STREET ADDRESS             |  | 4.3 STREET ADDRESS                                    |                 |
| CITY - ST - ZIP            |  | 4.4 CITY - ST - ZIP                                   |                 |
| TITLE                      | DS<br>STEEDE, ROBERT<br>9509 MONTELLO DR<br>ORLANDO FL               | 5.1 TITLE   | Change Addition |
| NAME                       |  | 5.2 NAME  |                 |
| STREET ADDRESS             |  | 5.3 STREET ADDRESS                                    |                 |
| CITY - ST - ZIP            |  | 5.4 CITY - ST - ZIP                                   |                 |
| TITLE                      | DST<br>PROSPEROSO, VELMA J<br>224 S FIRST ST<br>OCFEE FL             | 6.1 TITLE   | Change Addition |
| NAME                       |  | 6.2 NAME  |                 |
| STREET ADDRESS             |  | 6.3 STREET ADDRESS                                    |                 |
| CITY - ST - ZIP            |  | 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: *Edward C. Smith* 2/12/97 (407) 6443300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)