FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # 646494 (5)

1. Corporation Name
ANSWERITE "THE HELLO PEOPLE", INC.

Principal Place of Business
401 W FAIRBANKS AVE.
WINTER PARK FL 32789

Mailing Address
401 W FAIRBANKS AVE.
WINTER PARK FL 32789

3. Date Incorporated or Qualified: 11/13/1979
3a. Date of Last Report: 03/28/1995
4. FEI Number: 59-1949661 ☐ 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

SMITH, EDWARD C
401 W FAIRBANKS AVE.
WINTER PARK FL 32789

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 ______________________ DATE ________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	SMITH, EDWARD C.	
STREET ADDRESS	401 W FAIRBANKS AVE.	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	DV	☐ DELETE
NAME	COSMO, SAMUEL (DR.)	
STREET ADDRESS	336 HILLMAN AVE.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DS	☐ DELETE
NAME	JONES, CYNTHIA M.	
STREET ADDRESS	645 E. CONCORD STREET	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DV	☐ DELETE
NAME	JOHNSON, EDWIN K	
STREET ADDRESS	414 E PINE ST #1211	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DS	☐ DELETE
NAME	STEEDE, ROBERT	
STREET ADDRESS	9509 MONTELLO DR	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DST	☐ DELETE
NAME	PROSPEROSO, VELMA J	
STREET ADDRESS	224 S FIRST ST	
CITY-ST-ZIP	OCOEE FL	

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	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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 119.07(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 if changed, or on an attachment with an address.

SIGNATURE: Velma J. Prosperoso Treasurer 5/8/96 (407) 644-0300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Velma J. Prosperoso

CR2E034 (12/95)