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CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAR -2 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 741920 (3)

1. Corporation Name

FLORIDA TELECOMMUNICATIONS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
501 POLK ST STE 680 PO BOX 1776 TAMPA FL 33602	PO BOX 1776 PO BOX 1776 TAMPA FL 33601 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/08/1978
3a. Date of Last Report: 11/28/1994
4. FEI Number: 59-3054862 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
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

DE CHAMBEAU, MICHAEL
650 US HWY 27 N
LAKE WALES FL 33853

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T QUEREDO, OZZIE 375 PATRICIA AVE. DUNEDIN FL 34698	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition VICE PRESIDENT OSWALD QUEVEDO 34698-8190
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OTTE, RAY 16313 N DALE MABRY TAMPA FL 33618	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition PRESIDENT CORGAN, RON 12902 MAGNOLIA DRIVE TAMPA FL 33612-9497
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BRUNTON, DEBBIE 16313 N DALE MABRY TAMPA FL 33618	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILSON, BILL NASA., SI-CSD-3 JFK SPACE CENTER FL	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DECHAMBEAU, MICHAEL 650 US HWY 27 N LAKE WALES FL 33853	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☒ Change ☐ Addition CHAIRMAN of the BOARD
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KIRBY, KEITH 490 FIRST AVE S ST. PETERSBURG FL 33701	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☒ Change ☐ Addition TREASURER D LARSON, BETSY 880 CARILLON PARKWAY ST. PETERSBURG FL 33733-2749

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Michael D DeChambeau 2/14/95 813-678-2039
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
MICHAEL D DECHAMBEAU

0093230