

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **844342** (6)

1. Corporation Name  
**APPLIED COMMUNICATIONS, INC.**



Principal Place of Business: **330 SOUTH 108 AVE OMAHA NE 68154**  
Mailing Address: **330 SOUTH 108 AVE OMAHA NE 68154**

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

3. Date Incorporated or Qualified: **10/12/1979** 3a. Date of Last Report: **02/28/1995**  
4. FEI Number: **47-0567215** 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: **CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324**  
10. Name and Address of New Registered Agent: 81 Name: 82 Street Address (P.O. Box Numbers Not Acceptable): 83 City: 84 City: 85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0902 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 607.0909, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
V RUSSELL, DAVID 330 SOUTH 108 AVE OMAHA NE  
PD FISHER, WILLIAM 330 SOUTH 108 AVENUE OMAHA NE  
TD DUMAN, GREGORY 330 SOUTH 108 AVE OMAHA NE  
S STOKES, DAVID, P 330 S 108 AVE OMAHA NE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
11 TITLE: 12 NAME: 13 STREET ADDRESS: 14 CITY-STATE-ZIP:  
21 TITLE: 22 NAME: 23 STREET ADDRESS: 24 CITY-STATE-ZIP:  
31 TITLE: 32 NAME: 33 STREET ADDRESS: 34 CITY-STATE-ZIP:  
41 TITLE: 42 NAME: 43 STREET ADDRESS: 44 CITY-STATE-ZIP:  
51 TITLE: 52 NAME: 53 STREET ADDRESS: 54 CITY-STATE-ZIP:  
61 TITLE: 62 NAME: 63 STREET ADDRESS: 64 CITY-STATE-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)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement to 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 its agent, or trustee 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 attached sheet, as an address.

SIGNATURE: *David P. Stokes* David P. Stokes 1/19/96 390-8993  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #

CR2E034 (12/95)