

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001079

FILED
Apr 05, 2012
Secretary of State

Entity Name: TELOVATIONS INC.

Current Principal Place of Business:

1410 N WEST SHORE BLVD
STE 700
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1410 N WEST SHORE BLVD
STE 700
TAMPA, FL 33607

New Mailing Address:

FEI Number: 20-4285361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CSD
Name: SWANSON, MARK
Address: 1410 N WEST SHORE BLVD., STE 700
City-St-Zip: TAMPA, FL 33607

Title: CFO
Name: DONALD, KEVIN
Address: 1410 N WEST SHORE BLVD., STE 700
City-St-Zip: TAMPA, FL 33607

Title: VP
Name: KNIGHT, DOUG
Address: 1410 N WEST SHORE BLVD., STE 700
City-St-Zip: TAMPA, FL 33607

Title: DIR
Name: LEVERING, PAUL
Address: 3467 APEX PEAKWAY
City-St-Zip: APEX, NC 27502

Title: DIR
Name: MILLER, SCOTT
Address: 1700 S MACDILL AVE., STE 240A
City-St-Zip: TAMPA, FL 33629

Title: DIR
Name: KRUSEN, ANDREW
Address: 1414 W SWANN AVE., STE 100
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KEVIN G DONALD

CFO

04/05/2012

Electronic Signature of Signing Officer or Director

Date