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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F56504

(6)

TELEPHONE SERVICE AND SALES, INC.

FILED
Jan 27 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address						I IODAI <b>es</b> and Eisea Displayer Daith Clin		HERF GIBN BHAR	I BURI HAA
1200 DELTONA BLVD STE 58 DELTONA FL 32725		1200 deltona blyd Ste 58 Deltona fl 32725-8369	STE 58						
US		US	US			3. Date Incorporated or Qualified	3a. Date of Last Report		
2. Principal Place of Business 2a. Mailing Address					11/30/1981	04/	16/1996		
¬ `	lace of Business	2a. Mailing Address				4. FEI Number			oplied For
21] Suite, Apit	# etc	Suite Apt. #. etc.			~	59-2109330		\$8.75	ot Applicable
22	<i>"</i> 1 <b>0.0</b>	27				5. Certificate of Status Desired		<b>30.73</b> /	
City & State City & State					·	6. Election Campaign Financing		\$5.00	
23 28					Trust Fund Contribution		Added 1		
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for in	ntangible	tax under s	199.032,
24	25		30					] No	
	9. Name and Address of Cur	rent Registered Agent		81		10. Name and Address of New Re	jistered /	igent	
	D, JACK D			•	Name				
1141 MADURA DR.				82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
DEL	TONA FL 32725		-	83					
				84	City		FL	85 Zip (	Code
11 Pursuant	to the provisions of Sections 607.0	0502 and 607 1508. Flor do Statuto	s the ah		-named corn	poration submits this statement for the p	LL COCCO	obeneine it	n registered
office or re	egistered agent, or both, in the Sta	ate of Florida Such change was at	uthorized	ĺby	the corporati	ion's board of directors. I hereby accep	t the app	ointment as	registered
	m ramiliar with, and accept the ob	iligations of, Section 607.0505, Floi	rida Stati	utes					
SIGNATURE	Signature, typed or prored name of registered	atC/N) eldeadoos highly bris trace	Registered	Ager	nt signature require	ed when reinstating)	DATE	<del></del>	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	PD	☐ DELETE	1.1 TIT	LE				Change	Addition
NAME	BYRD, JACK D		1.2 NA	ME					
STREET ADDRESS	1141 MADURA DR.		1.3 \$1			•			
CHTY-ST-ZIP	DELTONA, FL 00000	·····	14 CF		- ZIP				
THEF	TSD	L_ DELETE 21TI						L Change	Addition
NAME	BYRD, PAULINE M								
STREET ADDRESS	***************************************				ADDRESS	•	4.		
CHTY+ST+ZIP THTLE				TY-S	T - ZIP			Change	Addition
NAME		בן מננונ	31 TH		ŀ	•		L Change	Addition
STREET ADDRESS			3 2 NA		NO DOLEGO				
CITY-ST-7IP			1		ADDRESS				
TITLE		DELETE	3.4. Cf		1 - ZIF			Charge	Addition
NAME		******	4. 2 N/						
STREET ADDRESS					address				}
CITY-ST-7/P			4.4 CIT						
TITLE		DELETE	5.1 TIT					Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 STI	REET	ADDRESS				1
CITY-ST-ZiP			5 4 C11	Y-ST	- ZIP				
1.TLE		☐ DELETE	6.1 TIT	LE				☐ Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 STI	REET /	address				
CITY-ST-ZIF			6.4 CH						
informatio	o indicated on this annual report o	ar supplemental annual report is tru	ue and a	CCD	rate and that	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal	l effect as	if made und	der nath: that l
I am an of	flicer or director of the corporation	or the receiver or trustee empower, or on an attachment with an add	re <u>d t</u> o e	xecu	te this reper	t as required by Chapter 607, Florida Si	atutes; ar	nd that my n	name