

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

FILED
Apr 24 1997 8:00am
Secretary of State

DOCUMENT # F93000001965 (3)

1. Corporation Name

TELE-TECH COMPANY, INC. OF KENTUCKY

Principal Place of Business

2628 WILHITE DR.
LEXINGTON KY 40503

Mailing Address

2628 WILHITE DR.
LEXINGTON KY 40503-3302



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

04/22/1993

3a. Date of Last Report

04/10/1996

4. FEI Number

61-0935720

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CP ☐ DELETE

NAME MORRIS, PHILIP C
STREET ADDRESS 2628 WILHITE DR.
CITY-ST-ZIP LEXINGTON KY 40503

TITLE D ☐ DELETE

NAME ALLISON, JOHN
STREET ADDRESS 441 SOUTHLAND DRIVE
CITY-ST-ZIP LEXINGTON KY 40503

TITLE VSD ☐ DELETE

NAME FREES, RANDALL M
STREET ADDRESS 2628 WILHITE DR.
CITY-ST-ZIP LEXINGTON KY 40503

TITLE VT ☐ DELETE

NAME SMITH, STEPHEN B
STREET ADDRESS 2628 WILHITE DR.
CITY-ST-ZIP LEXINGTON KY 40503

TITLE D ☐ DELETE

NAME MILWARD, GREG
STREET ADDRESS 360 E. VINE ST., P.O. BOX 2030 N/A
CITY-ST-ZIP LEXINGTON KY 40507

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Signature of Registered Agent

4-17-97 12 275-7508

CR2E034 (9/96)