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

**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	F9300001965
4 Composition Marga	

Corporation Name

TELE-TECH COMPANY, INC. OF KENTUCKY

	•		·						
Principal Plac	e of Business	Mailing Address							
2008 MERCER	- · · · · · · · · · · · · · · · · · · ·	2008 MERCER RD.							
LEXINGTON KY 40511 LEXINGTON KY 40511						DO NOT WRI	TE IN THIS	SPACE	
						3. Date Incorporated or Qualifed			
	•					04/22/1993			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number		Α	pplied For
21		26				61-0935720		N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired			Additional
22		27							tequired
City & Stat	te -	City & State	•			6: Election Campaign Financing		•	May Be
23	Country	28	Counti			Trust Fund Contribution			to Fees
Zip	Country	Zip	30	у		This corporation owes the cur     Personal Property Tax.	rent year inta	ngible □Yes	□No
24	9. Name and Address of Current		100			10. Name and Address of New	Registered A		
	5. Maine and Address of Current	r registered Agent	8	1 Na	me			<b>P</b> ·	
CT	CORPORATION SYSTEM					(D.O. D. M. Louis No. Assess	-61-1		
120	0 S. PINE ISLAND ROAD		8	2 Str	eet Addre	ss (P.O. Box Number is Not Accept	able)		
Pla	INTATION FL 33324		8	3					
			Ļ	4 00				les Zie	Code
	,		8	4 Cit	,		FL	85   Zip	Code
SIGNATURE	Signature, typed or printed name of registered agent		Registered Ag	ent signa	ture required	when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECT	ORS IN 12
TITLE	CP	☐ DELETE	1.1 TITLE		$\top$			Change	
NAME	MORRIS, PHILIP C		1.2 NAME						
STREET ADDRESS	AAAA MILLUTTE DD		1.3 STRE	ET ADDR	ess 2	008 MERCER ROAD			
CITY-ST-ZIP	LEXINGTON KY 40503		1.4 CITY-	ST-ZIP	L	EXINGTON, KY 40511			
TITLE	D							☐ Change	Addition
NAME	ALLISON, JOHN		2.2 NAME		1	•			
STREET ADDRESS	441 SOUTHLAND DRIVE		2.3 STRE	ET ADDR	ESS				
CITY-ST-ZIP	LEXINGTON KY 40503		2. 4 CITY						
TITLE	VSD	☐ DELETE	31 TITLE			ادار بادم شوای میلید د <u>انشست</u>	,~ ~ 7	Change	Addition
NAME	FREES, RANDALL M		3.2 NAME			OOG MEDGED DOAD			
STREET ADDRESS	1		3.3 STRE			008 MERCER ROAD			
CITY-ST-ZIP	LEXINGTON KY 40503	— — — — — — — — — — — — — — — — — — —	3.4. CITY		┷	EXINGTON, KY 40511	<del></del>	[X] Change	Addition
TITLE	VT ·	☐ DELETE	4.1 TITLE					M Criange	
NAME	SMITH, STEPHEN B		4. 2 NAM	_	`	2			
STREET ADDRESS			4.0.0		. J				
CITY-ST-ZIP	LEXINGTON KY 40503		4.3 STRE	ET ADDR		008 MERCER ROAD			
TITLE	n	□ nei ete	4.4 CITY-	ET ADDR ST-ZIP			_	☐ Change	Addition
NAME	D CDEC	☐ DELETE	4.4 CITY- 5.1 TITLE	ET ADDR ST-ZIP		008 MERCER ROAD		Change	Addition
	MILWARD, GREG		4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDR ST-ZIP	L	008 MERCER ROAD		☐ Change	Addition
STREET ADDRESS	MILWARD, GREG 360 E. VINE ST., P.O. BOX 203		4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE	ET ADDR ST-ZIP : ET ADDR	L	008 MERCER ROAD		Change	e ☐ Addition
CITY-ST-ZIP	MILWARD, GREG	30 N/A	4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDR ST-ZIP : ET ADDR ST-ZIP	L	008 MERCER ROAD		☐ Change	
	MILWARD, GREG 360 E. VINE ST., P.O. BOX 203		4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY-	ET ADDR ST-ZIP : ET ADDR ST-ZIP	L	008 MERCER ROAD			

14. I 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, with all other like empowered.

6.4 CfTY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

(606) 277-8000