

05041999-90131-030-\$150.00-\$150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F93000002840			
1. Corporation Name CHERRY COMMUNICATIONS OF ILLINOIS INC.--- WORLD ACCESS TELECOMMUNICATIONS GROUP, INC.			
Principal Place of Business 1919 SOUTH HIGHLAND AVENUE SUITE 1290 LOMBARD IL 60148 US		Mailing Address 1919 SOUTH HIGHLAND AVENUE SUITE 1290 LOMBARD IL 60148 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
3. Date Incorporated or Qualified 06/18/1993		4. FEI Number 36-3682357	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No		DO NOT WRITE IN THIS SPACE	
9. Name and Address of Current Registered Agent HIO CORPORATE SERVICES, INC. 526 E. PARK AVE SUITE 200 TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name C.T. Corporation System 82 Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Rd. 83 Plantation, Florida 33324 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 <u>Dale H. Morris</u> <u>Dale Morris</u> <u>As the President</u> <u>5-24-99</u> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointed)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP - PHILLIPS, JOHN D 945 EAST PACES FERRY ROAD ATLANTA GA 33207	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	Chairman, CEO & President
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CHMAR, W. TOD 945 EAST PACES FERRY ROAD ATLANTA GA 33207	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT GOETZ, VICTOR 1919 S. HIGHLAND AVENUE #1290 LOMBARD IL 60148	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BAY, DENNIS P.O. BOX SHAWNEE MISSION KS 66207	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSA SOWDER, LARRY 1919 SOUTH HIGHLAND AVENUE #1290 LOMBARD IL 60148	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: Dennis Bay EV 4-30-99 630/368-6800
Signature and typed or printed name of signing officer or director Date Key Phone #

CR2E034 (11/98)