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**FILED**  
**Mar 16, 1999 8:00 am**  
**Secretary of State**

03-16-1999 90073 022 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # F93000004485

1. Corporation Name  
**CLEAR COMMUNICATIONS GROUP, INC.**

Principal Place of Business Mailing Address  
 440 INTERSTATE NORTH PARKWAY 440 INTERSTATE NORTH PARKWAY  
 ATLANTA GA 30339 ATLANTA GA 30339

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**09/30/1993**

4. FEI Number Applied For  
**58-1953736** 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 owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NRAI SERVICES, INC.**  
 526 EAST PARK AVENUE  
 TALLAHASSEE FL 32301

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  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition

TITLE **CHM**  
 NAME **JOHNSTON, STEPHEN F SR**  
 STREET ADDRESS **550 RIVER VALLEY ROAD**  
 CITY-ST-ZIP **ATLANTA GA 30328**

1.1 TITLE  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP

TITLE **S**  DELETE  
 NAME **HUGHES, DAVID**  
 STREET ADDRESS **5310 NORTH POWERS FY RD.**  
 CITY-ST-ZIP **ATLANTA GA 30347**

2.1 TITLE **s/T**  Change  Addition  
 2.2 NAME **William J. Loughman**  
 2.3 STREET ADDRESS **1740 Kingsley Court**  
 2.4 CITY-ST-ZIP **Lawrenceville, GA 30043**

TITLE **D**  DELETE  
 NAME **ROUMELL, LISA**  
 STREET ADDRESS **300 FRANK W BURR BLVD.**  
 CITY-ST-ZIP **TEANECK NJ 07666**

3.1 TITLE  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

TITLE **D**  DELETE  
 NAME **MINERICH, ROBERT**  
 STREET ADDRESS **P.O. BOX 536, N/A**  
 CITY-ST-ZIP **RICHMOND KY 40475**

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE **D**  DELETE  
 NAME **LAMBRIX, ROBERT J**  
 STREET ADDRESS **2501 EAST AVENUE, APT. 201**  
 CITY-ST-ZIP **ROCHESTER NY 14610**

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

TITLE **D**  DELETE  
 NAME **ROSCOE, ANDREW**  
 STREET ADDRESS **1130 CONNECTICUT AVENUE N.W., #325**  
 CITY-ST-ZIP **WASHINGTON DC 20036-3915**

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

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: William J. Loughman Mar. 3/99 770-763-5620  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)