

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Sep 30 1998 8:00am**  
**Secretary of State**

**DOCUMENT # F93000004556 (7)**

1. Corporation Name

**COIN OPERATED PHONES, INC.**



Principal Place of Business

**619 KIRKWOOD TERR. NORTH  
APT 1  
ST. PETERSBURG FL 33701  
US**

Mailing Address

**619 KIRKWOOD TERR. NORTH  
APT 1  
ST. PETERSBURG FL 33701  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/04/1993**

4. FEI Number

**35-1718255**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip

**25** Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**28** Zip

**30** Country

9. Name and Address of Current Registered Agent

**EATON, DAVID A P.A.  
7301 NINTH STREET NORTH  
ST. PETERSBURG FL 33702**

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 **CD** ☐ DELETE  
NAME **KNOWLES, MILES V**  
STREET ADDRESS **15121 FEIGHNER RD.**  
CITY-ST-ZIP **ROANOKE IN 46783**

TITLE **P** ☐ DELETE  
NAME **KNOWLES, MILES V.PETER**  
STREET ADDRESS **15121 FEIGHNER RD.**  
CITY-ST-ZIP **ROANOKE IN 46783**

TITLE **V** ☐ DELETE  
NAME **CRISWELL, RONALD G**  
STREET ADDRESS **2315 CHARLOTTE AVENUE**  
CITY-ST-ZIP **FT. WAYNE IN 47805**

TITLE **ST** ☐ DELETE  
NAME **CRISWELL, CYNTHIA L**  
STREET ADDRESS **2315 CHARLOTTE AVENUE**  
CITY-ST-ZIP **FT. WAYNE IN 47805**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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

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

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

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.

SIGNATURE

*[Signature]*

**9/16/98**

**727-822-4816**

CR2E034 (5/98)

COIN OPERATED PHONES, INC.  
Miles V. Knowles, President

619 KIRKWOOD TERR. N.  
APT. 1  
ST. PETERSBURG FL 33701-1615

(2)

Division of Corporations:

Dear Sir,

I called this morning to explain that I did not receive the first notification. I thought that perhaps it had went to my original address but I checked and it was not at that address either.

It's possible it could have been left in one of the other boxes at my apt complex. In any case I did not receive it.

The phone attendant instructed me to send the \$150.00 with a letter of explanation.

Sincerely  
M. Knowles  
C.O.P.I.