FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

F9400001258 (2)

TENNMARK TELECOMMUNICATIONS, INC.

Principal Place i	of Business	Mailing Address					
903 INDUSTRIAL DR.		903 INDUSTRIAL DR.					
MURFREESB	ORO TN 37129	MURFREESBORO TN	37129				
				3.	Date Incorporated or Qualified 03/14/1994	3a. Date of L 02/1	ast Report 4/1995
2. Principal Piar 21	ce of Business	2a. Mailing Address 26		4.	FEI Number 62-1202425		Applied For Not Applicable
Suite, Apt #	, etc.	Suite, Apt. #, etc.		5.	Certificate of Status Desired	% \$	8.75 Additional Fee Required
Oty & State		City & State		I	Election Campaign Financing Trust Fund Contribution		55.00 May Be Added to Fees
Zg)	Country 25	Zip 29	Country 30	8.	This corporation has liability for Florida Statutes	intangible tax un	
	9. Name and Address of Current	Registered Agent		10.	Name and Address of New R		1t
			81 Nami	e BOB CA	MPRFII		
	ELL, BOB 9th St.		82 Stree 10	et Address (P.C	D. Box Number is Not Acceptab 4TH STREET	ole)	
	AK SPRINGS FL 32433		83				******
			84 City DE	FUNIAK	SPRINGS, FL	FL 85	32433
 Pursuant to or registere 	the provisions of Sections 607.0502 d agent, or both, in the State of Florid	and 607,1508, Florida Statut a. Such change was authoriz	as the shown named	corporation o	shmite this platement for the new	rpose of changin	g its registered office
familiar with	i, and accept the opligations of, Section	on 607.0505, Florida Statutes	i.	o board or an	soloto. Thereby accept the app	Ommonic as regis	stereo agent. Fam
SIGNATURE	Bob Campbell Surable typed or protect name of egintaries agent a	Bob Ca	MAP bc (DTE Pagistered Agent signatur	o sou de dutas me	ncfolved	1-26-96	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIR	ECTORS IN 12
TITLE	Р	DECETE	1 1 TITLE			Ch	
NAME	BLAKEMORE, TERRY		1.2 NAME				
STREET ADDRESS	903 INDUSTRIAL DR.		13 STREET ADDRESS	S			
C 1Y - S1 - Z/P	MURFREESBORO TN 37129		14 CITY - ST - 7IP				
TilkF	ST	☐ DELFTE	2 1 THILE			☐ Ch	ange Addition
NAME	CLEMONS, ROBERT		2.2 NAME				
STREET ADDRESS	903 INDUSTRIAL DR.		2.3 STHEET ADDRESS	S			
Crity-Si-ZiP	MURFREESBORO TN 37129		2.4 CiTY - ST - ZiP				
THE		DELETE	3 1 TIFLE			☐ Ch	ange Addition
NAME			3 2 NAME				
STREET ADDRESS			33 STREET ADDRES	s			
_ CITA - ST - SIE			3 4 CITY-ST-ZIP				
TITLE		☐ DELETE	4. 1 Bitle			Ch	ange D Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS	5			
CHTY-ST ZIF		Drift	4.4 CITY - ST - ZIP	 			
THELE		☐ DELETE	5 1 TITLE			Ch	ange
NAME Count Appended			5.2 NAME				
STREET ADORESS			5 3 STREET ADDRESS	`			
CITY-ST-ZIF TITLE		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE			Ch	ange Addition
NAMÉ							auße 🔲 wantinit
STEEL LADORESS			6.2 NAME	,			
STELL NUMESS			6.3 STREET ADDRESS	`			

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 atlachment with an address. TERRY BLAKEMOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

TERRY BLAKEMORE, PRESIDENT/CEO

1-26-96

615-890-3505

- I (A B)/80 (K) A (B)(I A(B)) A B)(K BA)(I BA)(I A B)(I AA)(I K)(I A B)(I A)(I A)