

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 # **F94000003937 (9)**

1. Corporation Name

**DIAL CALL FLORIDA, INC.**



Principal Place of Business

Mailing Address

**6575 THE CORNERS PKWY  
NORCROSS GA 30092  
US**

**6575 THE CORNERS PKWY  
NORCROSS GA 30092  
US**

2. Principal Place of Business

2a. Mailing Address

**21 201 ROUTE 17 NORTH**

**26 201 ROUTE 17 NORTH**

Suite, Apt. #, etc

Suite, Apt. #, etc

**22 12 FL**

**27 12 FL**

City & State

City & State

**23 RUTHERFORD, NJ**

**28 RUTHERFORD**

Zip

Country

Zip

Country

**24 07070**

**25 BERGEN**

**29 07070**

**30 BERGEN**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**07/27/1994**

3a. Date of Last Report

**04/19/1995**

4. FEI Number

**57-0992906**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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

**N/A**

Signature, typed or printed name of registered agent, if and only if applicable (If the Registered Agent signature required when agent changes)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**NAME  
HULTMAN, JEFFREY R  
STREET ADDRESS  
301 COLLEGE STREET, STE 700  
CITY-ST-ZIP  
GREENVILLE SC**

1.1 TITLE ☐ Change ☒ Addition

**1.2 NAME  
THOMAS D. HICKEY  
1.3 STREET ADDRESS  
201 ROUTE 17 N  
1.4 CITY-ST-ZIP  
RUTHERFORD N.J. 07070**

TITLE ☐ DELETE

**NAME  
WEBER, MARY E  
STREET ADDRESS  
301 COLLEGE STREET, STE #700  
CITY-ST-ZIP  
GREENVILLE SC**

2.1 TITLE ☐ Change ☒ Addition

**2.2 NAME  
VILE CHAIRMEN OF PARENT CO.  
2.3 STREET ADDRESS  
BRIAN MCANLEY  
2.4 CITY-ST-ZIP  
201 ROUTE 17 N  
RUTHERFORD N.J. 07070**

TITLE ☐ DELETE

**NAME  
HILL, JOHN I. III  
STREET ADDRESS  
6575 THE CORNERS PARKWAY  
CITY-ST-ZIP  
NORCROSS GA**

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

7.1 TITLE ☐ Change ☐ Addition

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BRIAN MCANLEY**

**201-438-1400**

Date

Daytime Phone

CR2E034 (12/95)