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 # **F94000005504 (5)**

1. Corporation Name

TELCOM NETWORK, INC. OF DELAWARE

Principal Place of Business	Mailing Address
25 SOUTH MAGNOLIA AVE. ORLANDO FL 32801	25 SOUTH MAGNOLIA AVE. ORLANDO FL 32801

3. Date Incorporated or Qualified: **10/24/1994**

3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business	2a. Mailing Address
21 2575 ULMERTON RD	26 2575 ULMERTON RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 # 300	27 # 300
City & State	City & State
23 CLEARWATER, FL	28 CLEARWATER, FL
Zip / Country	Zip / Country
24 34622 / 25	29 34622 / 30

4. FEI Number: 22-3262830 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BARRY, STEPHEN T
25 SOUTH MAGNOLIA AVE.
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name: SALMON, EDWIN B JR
82 Street Address (P.O. Box Number is Not Acceptable): 2575 ULMERTON RD
83: # 300
84 City: CLEARWATER FL 85 Zip Code: 34622

11. Pursuant to the provisions of Section 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: EDWIN B SALMON JR SID — 4-30-96
Signature, typed or printed name of registered agent and title, if applicable — NOTE: Registered Agent signature required when reinstated — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	☐ DELETE	11 TITLE: V	☒ Change ☐ Addition
NAME	KELCHNERM TERRY		12 NAME: KELCHNER, TERRY	
STREET ADDRESS	25 S. MAGNOLIA AVE.		13 STREET ADDRESS:	
CITY-ST-ZIP	ORLANDO FL		14 CITY-ST-ZIP:	
TITLE	VP	☐ DELETE	21 TITLE: V	☒ Change ☐ Addition
NAME	BERNSEN, DAVE		22 NAME:	
STREET ADDRESS	408 NUTMEG ST.		23 STREET ADDRESS:	
CITY-ST-ZIP	SAN DIEGO CA		24 CITY-ST-ZIP:	
TITLE	P	☒ DELETE	31 TITLE:	☐ Change ☐ Addition
NAME	BARRY, STEPHEN T		32 NAME:	
STREET ADDRESS	25 SOUTH MAGNOLIA AVE.		33 STREET ADDRESS:	
CITY-ST-ZIP	ORLANDO FL 32801		34 CITY-ST-ZIP:	
TITLE	V	☐ DELETE	41 TITLE: P	☒ Change ☐ Addition
NAME	OLIVET, DAVID J		42 NAME:	
STREET ADDRESS	25 SOUTH MAGNOLIA AVE.		43 STREET ADDRESS: 408 NUTMEG ST	
CITY-ST-ZIP	ORLANDO FL 32801		44 CITY-ST-ZIP: SAN DIEGO CA 92103	
TITLE		☐ DELETE	51 TITLE: SD	☐ Change ☒ Addition
NAME			52 NAME: SALMON, EDWIN B	
STREET ADDRESS			53 STREET ADDRESS: 2575 ULMERTON RD #300	
CITY-ST-ZIP			54 CITY-ST-ZIP: CLEARWATER, FL 34622	
TITLE		☐ DELETE	61 TITLE:	☐ Change ☐ Addition
NAME			62 NAME:	
STREET ADDRESS			63 STREET ADDRESS:	
CITY-ST-ZIP			64 CITY-ST-ZIP:	

CR2E034 (12/95)

14. I 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)(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: EDWIN B. SALMON JR. — 4/30/96 — (813) 571-1185
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #