FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9500000397 (8)

ZENEX LONG DISTANCE, INC.

FILED
Jun 17 1997 8:00am
Secretary of State

D. J. 10							ar (6 a 1111 0 131)	
Principal Place of Business Mailing Address					I INDIIAD IIIN JAINI ANIII ANIII BAIR BAIR BAIR		NOTED EIGHT HOLE	4 1661 1861
3705 W MEM	ORIAL	-2002-NW-122ND -						
SUITE 101-Z	NEW AN HARA	SUITE-18	44					
US US	CITY OK 73034	OKLAHOMA CITY OK 73120- US	1955					
08		US			3. Date Incorporated or Qualified	1	ate of Last F	Report
<u> </u>	D:				01/25/1995	05/3	30/1996	
[Place of Business	2a. Mailing Address	• .		4. FEt Number		Ar	pplied For
21		26 2912 hak	eside	, Ur.	73-1441589		No	ot Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		27 Suite 100	3		b. Certificate of Status Desired	ш	Fee Ro	equired
City & Sta	lte	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28 OKla. Cot	ر به	OK.	Trust Fund Contribution			to Fees
Zip	Country	Zip	_ Count		8. This corporation has liability for	intangible	tax under s	i. 199.032.
24	25	29 7312O 3	o] {	JSA	Florida Statutes] Yes [] No	
	9. Name and Address of Curi	ent Registered Agent			10. Name and Address of New Re	gistered /	Agent	
СТ	CORPORATION SYSTEM		8	Name				
	O SOUTH PINE ISLAND ROAD		_					
	ANTATION FL 33324		8:	Street	Address (P.O. Box Number is Not Acceptate	ile)		
l t	difficit i E GGGET		83	3		····		
}								
, ,			84	City			85 Zip (Code
dd Durayant	to the providence of Continue COZ O	F00		J		FL		
office or	registered agent, or both, in the Sta	502 and 607.1508, Florida Statutes, ale of Florida. Such channe was aut	, the abor horized b	re-named by the corr	corporation submits this statement for the poration's board of directors. I hereby accep	iurpose of	changing it	ts registered
Tugent, I a	am familiar with, and accept the ob-	ligations of, Section 607.0505, Florid	la Statute) (10 00.1)S.	politically sound of all oblicits. Thereby according	A in to tappe	Jiiiliioill as	registored
SIGNATURE								
	Signature, typed or printed name of registered		legislered Ag	ent signature	required when reinstating)	DATE		
12.		IND DIRECTORS	13.	<u>-</u>	ADDITIONS/CHANGES TO OFFICE			
TITLE	PD	☐ DELETE	1.1 TITLE				Change	Addition
NAME	ADUDDELL, DAVID W		1.2 NAME					
STREET ADDRESS	-216 TULLAHOMA		1.3 STREE	1 ADDRESS	6001N.Santetes			
CITY-ST-ZiP	EDMOND OK		1.4 CITY-	ST-ZIP	Edmond OK 7305	ьü		
TITLE	VO	≥ DELETE	2.1 TITLE			<u> </u>	Change	Addition
NAME	WORTH, CALVIN F		2.2 NAME					
STREET ADDRESS	5904 MORNING DOVE LANE	:		T ADDRESS				
CITY-ST-ZIP	EDMOND OK 73003	'						
TITLE	CEOD	DELETE	2.4 CITY-	S1-ZIP			Change	Addition
NAME	MURCER, BOBBY R						☐ Change	MUUIIIIII
	3244 WHIPPOORWILL ROAD		3.2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP	OKLAHOMA CITY OK 73120		3.4. CITY	ST-ZIP				
TITLE	\$	≥ DELETE	4.1 TITLE		SID	ļ	☐ Change	Addition
NAME	TOM RILEY		4. 2 NAME		zabel, Steve			
STREET ADDRESS	13439 N BROADWAY, SUITE	200	4.3 STREE	1 ADDRESS	2413 Brookdale Ave			
CITY-ST-ZIP	OKLAHOMA CITY OK		4.4 CHY-	ST - ZIP	Edmond, OK 73034			
TITLE	D	☐ DELETE	5 1 TITLE		P		Change	Addition
NAME	ADUDDELL, STEPHEN H		5.2 NAME		Aduddell, Steven	i	r -	
STREET ADDRESS	9701 HEFNER VILLAGE BLVI	b. I		1 ADDRESS	2828 Blue Spruce			
CITY-ST-ZIP	OKLAHOMA CITY OK 73182		5.4 CITY-			Ł		
TITLE	THE WISHING OF THE POLICE	DELLTE	6.1 TITLE	01-ZIF	Edmond, OK 73003		Change	Addition
NAME		Detect	ļ.					L.J Addition
RANGE	I		6.2 NAME					

6.3 STREET ADDRESS

6.4 CITY - \$1 - ZIP 14. I do 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 popular or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the consortation or the effect or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the consortation or the effect of the consortation or the effect of the