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 # F95000001474 (4)

1. Corporation Name

AUDIO FIDELITY COMMUNICATIONS CORPORATION

Principal Place of Business

~~4120 COX RD~~
~~GLEN ALLEN VA 23060~~

Mailing Address

~~4120 COX RD~~
~~GLEN ALLEN VA 23060~~

3. Date Incorporated or Qualified: 03/28/1995

3a. Date of Last Report: 3/13/95

4. FEI Number: 54-0617014 — Applied For / Not Applicable

2. Principal Place of Business
21: 3900 GASKINS ROAD
Suite, Apt. #, etc.
22:
City & State
23: RICHMOND, VA
24 Zip: 23233
25 Country: HENRICO

2a. Mailing Address
26: 3900 GASKINS ROAD
Suite, Apt. #, etc.
27:
City & State
28: RICHMOND, VA
29 Zip: 23233
30 Country: HENRICO

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

~~FOY, GRADY~~
~~4833 SCOTCH PINE CT~~
~~JACKSONVILLE FL 32210~~

10. Name and Address of New Registered Agent

81 Name: GRADY FOY
82 Street Address (P.O. Box Number is Not Acceptable): 3728 PHILLIPS HWY,
83: SUITE 214
84 City: JACKSONVILLE FL
85 Zip Code: 32207

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], CFO — DATE: 2/26/96

12. OFFICERS AND DIRECTORS

TITLE	PST	☐ DELETE
NAME	WHITLOCK, JOHN D	
STREET ADDRESS	PO BOX 130 (N/A)	
CITY-ST-ZIP	MINERAL VA 23117	
TITLE	V	☐ DELETE
NAME	WHITLOCK, W.W.	
STREET ADDRESS	PO BOX 130 (N/A)	
CITY-ST-ZIP	MINERAL VA 23117	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 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 attachment with an address.

SIGNATURE: [signatures] 2/26/96 804 273 9100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

CR2E034 (12/95)