

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 29, 1998 8:00 am
Secretary of State

DOCUMENT # **F95000002804 (1)**

1. Corporation Name
DELTATEL, INC.



Principal Place of Business

**1030 DELTA BLVD
DEPT 852
ATLANTA GA 30320**

Mailing Address

**1030 DELTA BLVD
DEPT 852
ATLANTA GA 30320**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/09/1995

4. FEI Number

58-2187905

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

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Zip

29

Country

30

Country

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City

32

State

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Zip Code

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City

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State

36

Zip Code

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City

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State

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Zip Code

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City

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State

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Zip Code

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City

44

State

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Zip Code

46

City

47

State

48

Zip Code

49

City

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State

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Zip Code

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City

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State

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Zip Code

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**C
NAME
COGGIN, ROBERT W
STREET ADDRESS
1030 DELTA BLVD
CITY-ST-ZIP
ATLANTA GA**

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

**D
NAME
MATSEN, PAUL G
STREET ADDRESS
1030 DELTA BLVD
CITY-ST-ZIP
ATLANTA GA**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

**P
NAME
TAYLOR, DAVID A
STREET ADDRESS
1030 DELTA BLVD
CITY-ST-ZIP
ATLANTA GA 30320**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

**V
NAME
CROWDER, TERRI A
STREET ADDRESS
1030 DELTA BLVD
CITY-ST-ZIP
ATLANTA GA**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

**T
NAME
WEST, EDWARD H
STREET ADDRESS
1030 DELTA BLVD
CITY-ST-ZIP
ATLANTA GA 30320**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

**S
NAME
Kenneth A. Klatt
STREET ADDRESS
1030 Delta Blvd.
CITY-ST-ZIP
Atlanta, GA 30320**

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 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: X

Antoinette B. O'Reilly

01/26/98

404-715-6611

CR2E034 (10/97)