

4-18-97 P. 4923
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Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000005018 (5)

1. Corporation Name:

ATN COMMUNICATIONS INCORPORATED

Principal Place of Business

1509 GOVERNMENT ST
MOBILE AL 36604

Mailing Address

1509 GOVERNMENT ST
MOBILE AL 36604-2027

3. Date Incorporated or Qualified

10/16/1995

3a. Date of Last Report

05/09/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

63-1153355

Applied For

Not Applicable

6. 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

ELLIOTT, NICHOLAS
2854 S.E. FEDERAL HWY
34994T FL 33617-2456

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2854 S.E. FEDERAL HWY

83

84

City STUART

FL

85

Zip Code

34994

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 of the registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP
NAME ELLIOT, NICHOLAS
STREET ADDRESS 1509 GOVERNMENT ST
CITY-ST-ZIP MOBILE AL 36604

TITLE DS
NAME DEVITO, DEBRA
STREET ADDRESS 1509 GOVERNMENT ST
CITY-ST-ZIP MOBILE AL 36604

TITLE DP
NAME Courtney, Rich
STREET ADDRESS 1509 Government Street
CITY-ST-ZIP Mobile AL 36604

TITLE DVP
NAME Shimp, Robert
STREET ADDRESS 1509 Government Street
CITY-ST-ZIP Mobile AL 36604

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DCS
1.2 NAME Elliott, Nicholas
1.3 STREET ADDRESS same
1.4 CITY-ST-ZIP same

2.1 TITLE DT
2.2 NAME DeVito, Debra
2.3 STREET ADDRESS same
2.4 CITY-ST-ZIP same

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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, changed, or on an attachment with an address.

SIGNATURE:

Debra DeVito

Debra DeVito, CEO 3/01/97

(334) 479-9400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0483434

CR2E034 (9/96)