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FILED
May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000001650 (8)

1. Corporation Name

NETEXCHANGE OF CENTRAL FLORIDA, INC.



Principal Place of Business

Mailing Address

~~2701 FORGYTH ROAD, SUITE 101
WINTER PARK, FL 32789~~

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WINTER PARK, FL 32789~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2110 FREDRICA DR.

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip

32812

Country

USA

3. Mailing Address

12110 FREDRICA DR.

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip

32812

Country

USA

3. Date Incorporated or Qualified

03/27/1996

FEI Number

59-3425308

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

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 N ORANGE AVE., STE. 1100
ORLANDO FL 32801

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 the applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~OPS~~ ☒ DELETE
NAME ~~TENGLISH, TERRY L~~
STREET ADDRESS ~~4010 VIA PILAR~~
CITY-ST-ZIP ~~ORLANDO FL 32825~~

TITLE ~~ST~~ ☒ DELETE
NAME ~~MOSELER, JOHN ERIC~~
STREET ADDRESS ~~6050 BELLINGHAM DR~~
CITY-ST-ZIP ~~ORLANDO FL~~

TITLE ~~D~~ ☐ DELETE
NAME BRIDGES, WARREN D
STREET ADDRESS 1715 FREDRICA DR.
CITY-ST-ZIP ORLANDO FL 32812

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 ~~DPST~~ ☐ Change ☐ Addition
1.2 NAME BRIDGES, WARREN D
1.3 STREET ADDRESS 1715 FREDRICA DR
1.4 CITY-ST-ZIP ORLANDO FL 32812

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME BRIDGES, CATHERINE C
2.3 STREET ADDRESS 1715 FREDRICA DR
2.4 CITY-ST-ZIP ORLANDO FL 32812

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 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

Warren D. Bridges

38 April 1998 407 275 1990

CR2E034 (10/97)