

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90014 008 ***150.00

DOCUMENT # F96000004186

1. Corporation Name

Communications Central, Inc.

Principal Place of Business

Mailing Address

1429 Massaro Blvd.
Tampa, FL 33619

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
8-15-96

2. Principal Place of Business

2a. Mailing Address

21 10120 Windhorst Rd.
Suite, Apt. #, etc.

26 10120 Windhorst Rd.
Suite, Apt. #, etc.

4. FEI Number

58-1804173

Applied For

Not Applicable

22 City & State
Tampa, FL

27 City & State
Tampa, FL

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip 33619 Country USA

28 Zip 33619 Country USA

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

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8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Corporation Service Company
1201 Hayes Street
Tallahassee, FL 32301

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 CEPD ☒ DELETE
NAME Robert D. Hill
STREET ADDRESS 1429 Massaro Blvd.
CITY-ST-ZIP Tampa, FL 33619

1.1 TITLE President/Director ☐ Change ☒ Addition
1.2 NAME David R. Hill
1.3 STREET ADDRESS 10120 Windhorst Rd.
1.4 CITY-ST-ZIP Tampa, FL 33619

TITLE S ☒ DELETE
NAME Michele Wilner
STREET ADDRESS 1429 Massaro Blvd.
CITY-ST-ZIP Tampa, FL 33619

2.1 TITLE Secretary ☐ Change ☒ Addition
2.2 NAME Theodore C. Rammelkamp
2.3 STREET ADDRESS 10120 Windhorst Rd.
2.4 CITY-ST-ZIP Tampa, FL 33619

TITLE SVT ☒ DELETE
NAME Michael Hayes
STREET ADDRESS 1429 Massaro Blvd.
CITY-ST-ZIP Tampa, FL 33619

3.1 TITLE Treasurer ☐ Change ☒ Addition
3.2 NAME Michael Hayes
3.3 STREET ADDRESS 10120 Windhorst Rd.
3.4 CITY-ST-ZIP Tampa, FL 33619

TITLE SV ☒ DELETE
NAME Theodore Rammelkamp
STREET ADDRESS 1429 Massaro Blvd.
CITY-ST-ZIP Tampa, FL 33619

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

TITLE Direct ☒ DELETE
NAME David Hill
STREET ADDRESS 1429 Massaro Blvd.
CITY-ST-ZIP Tampa, FL 33619

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

TITLE D ☒ DELETE
NAME Paul B. Demirdjiam
STREET ADDRESS 1429 Massaro Blvd.
CITY-ST-ZIP Tampa, FL 33619

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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Theodore C. Rammelkamp - Secretary

4-21-99

813-628-8000

Date

Daytime Phone #

CR2E034 (11/98)