

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

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Apr 16 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000004421 (1)**

1. Corporation Name  
**UCN, INC.**

Principal Place of Business  
**1299 E. ARTESIA BLVD. SUITE 240  
CARSON GA 90746**

Mailing Address  
**1299 E. ARTESIA BLVD. SUITE 240  
CARSON GA 90746-1800**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/27/1996</b>		3a. Date of Last Report	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>33-0606716</b>		Applied For <input type="checkbox"/> Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>NRAI SERVICES, INC.</b> <b>526 E. PARK AVENUE</b> <b>TALLAHASSEE FL 32301</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	<b>FL</b>	85

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
	<b>PD</b>	<b>RUFFING, NANCY A</b>	<b>1299 E. ARTESIA BLVD. SUITE 240 CARSON CA 90746</b>				
	<b>CEO</b>	<b>VAN VLIET, WILLIAM</b>	<b>1299 E. ARTESIA BLVD. SUITE 240 CARSON CA 90746</b>				
	<b>DST</b>	<b>COLEMAN, NELSON H</b>	<b>1299 E. ARTESIA BLVD. SUITE 240 CARSON CA 90746</b>				
	<b>D</b>	<b>HENDERSON, RICHARD S</b>	<b>889 BENDIX DRIVE JACKSON TN 38301</b>				
	<b>D</b>	<b>ELLIS, ERNEST L</b>	<b>222 N. SEPULVEDA, SUITE 2000 EL SEQUENDO CA 90245</b>				

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 if changed, or on an attachment with an address.

SIGNATURE: *Nancy Ruffing* **REQUIRED** 4/7/97 (310) 668-2055

CR2E034 (9/96)