

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

FILED

May 06 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 # F97000000939 (5)

1. Corporation Name

NACT TELECOMMUNICATIONS, INC.



Principal Place of Business

Mailing Address

~~802 E 720 S~~
~~OREM UT 84058~~

~~382 E 720 S~~
~~OREM UT 84058~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/21/1997

2. Principal Place of Business

21 191 WEST 5200 NORTH

2a. Mailing Address

26 SAME

4. FEI Number

87-0378662

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

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

29 Zip

UTAH

Country

84604

USA

Country

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 SAME

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

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

TITLE	DC	<input type="checkbox"/> DELETE
NAME	SAWYER, THOMAS E	
STREET ADDRESS	802 E 720 S 191 WEST 5200 NORTH	
CITY-ST-ZIP	OREM UT 84058 PROVO, UT 84604	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	WALLACE, A LINDSAY	
STREET ADDRESS	802 E 720 S 191 WEST 5200 NORTH	
CITY-ST-ZIP	OREM UT 84058 PROVO, UT 84604	
TITLE	CEO	<input type="checkbox"/> DELETE
NAME	WALLACE, A LINDSAY	
STREET ADDRESS	802 E 720 S 191 WEST 5200 NORTH	
CITY-ST-ZIP	OREM UT 84058 PROVO, UT 84604	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BLANKSTEIN, W GORDON	
STREET ADDRESS	1030-999 W HASTINGS ST	
CITY-ST-ZIP	VANCOUVER, BC CANADA V6C 2W2	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	OLSON, ROBERT L	
STREET ADDRESS	4317 NE THURSTON WAY	
CITY-ST-ZIP	VANCOUVER WA 98082	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	IRWIN, STEPHEN	
STREET ADDRESS	505 PARK AVE	
CITY-ST-ZIP	NY NY 10022	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	STEVEN A. ODOM	
1.3 STREET ADDRESS	945 E. PACES FERRY RD., STE 2240	
1.4 CITY-ST-ZIP	ATLANTA, GA 30326	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	HENSLEY E. WEST	
2.3 STREET ADDRESS	945 E. PACES FERRY RD., STE 2240	
2.4 CITY-ST-ZIP	ATLANTA, GA 30326	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MARK A. GERGEL	
3.3 STREET ADDRESS	945 E. PACES FERRY RD., STE 2240	
3.4 CITY-ST-ZIP	ATLANTA, GA 30326	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	SCOTT N. MADIGAN	
4.3 STREET ADDRESS	945 E. PACES FERRY RD., STE 2240	
4.4 CITY-ST-ZIP	ATLANTA, GA 30326	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:  ERIC E. GURR 4/14/98 (401) 802-3mm

CR2E034 (10/97)