

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

FILED

May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000003108 (4)**
1. Corporation Name
TELECOM FINANCIAL SERVICES CORPORATION

Principal Place of Business 55 FEDERAL RD. DANBURY CT 06810	Mailing Address 55 FEDERAL RD. DANBURY CT 06810
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/12/1997	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 06-1482849		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENNETT, STEPHEN M	1.2 NAME	
STREET ADDRESS	55 FEDERAL RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06810	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREELEY, JOHN M	2.2 NAME	
STREET ADDRESS	55 FEDERAL RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06810	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TUCKER, DAVID E	3.2 NAME	
STREET ADDRESS	55 FEDERAL RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06810	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAUGHN, JERRY E	4.2 NAME	
STREET ADDRESS	55 FEDERAL RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06810	4.4 CITY-ST-ZIP	
TITLE	VT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOFSTROM, DONALD J	5.2 NAME	
STREET ADDRESS	55 FEDERAL RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06810	5.4 CITY-ST-ZIP	
TITLE	DS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	APT, LESLEY A	6.2 NAME	
STREET ADDRESS	55 FEDERAL RD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	DANBURY CT 06810	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: *16. 1/8/1* *Gary J. Schulman* *4-27-93* *003-254-1141*

CR2E034 (10/97)