

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

APPROVED
AND
FILED

00 JUN 23 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT



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

DOCUMENT # **F97000004118**

1. Corporation Name
National Telemanagement Corporation

Principal Place of Business

Mailing Address

Same as
mailing
address

**8828 Stemmons Frewy Ste. 212
Dallas, TX 75247**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/04/97

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

75-2051548

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

10. Name and Address of New Registered Agent

**Corporation Service Company
1201 Hays St
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. Continued

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **President**
George Lebus
STREET ADDRESS **8828 Stemmons Ste 212**
CITY-ST-ZIP **Dallas TX 75247**

TITLE ☐ DELETE

NAME **Assistant Secretary**
Nancy Watson
STREET ADDRESS **8828 Stemmons Ste 212**
CITY-ST-ZIP **Dallas TX 75247**

TITLE ☐ DELETE

NAME **CFO, Treasurer**
Lance Shipp
STREET ADDRESS **8828 Stemmons Ste 212**
CITY-ST-ZIP **Dallas TX 75247**

TITLE ☐ DELETE

NAME **Secretary**
William Milne
STREET ADDRESS **13760 Noel Rd Ste. 101**
CITY-ST-ZIP **Dallas TX 75240**

TITLE ☐ DELETE

NAME **Director**
David Millet
STREET ADDRESS **20 William St Ste 250**
CITY-ST-ZIP **Wellesley MA 02481**

TITLE ☐ DELETE

NAME **Director**
John Farmer
STREET ADDRESS **200 Crescent Ct 16th Floor**
CITY-ST-ZIP **Dallas TX 75201**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Director

James Devlin

11300 N. Central Ste 602

Dallas TX 75243

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Director

Bill Davidson

5501 West Rosedale

Fort Worth, TX 76107

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

**Continuation
of
#12**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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******558.75 ****558.75**

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nancy Watson, Assistant Secretary

6/21/00

Date

(214) 640-4194

Daytime Phone #

CR2E034 1097