## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

2200 FRONT ST

**PROFIT** CORPORATION ANNUAL REPORT

1999

Principal Place of Business

**SIGNATURE:** 

2200 FRONT ST



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000006340)

TANTIVY COMMUNICATIONS, INC.

**FILED** Jul 29, 1999 8:00 am Secretary of State

07-29-1999 90018 025 \*\*\*550.00

598273 - 90018 - 25 3 \* 

300 Melbourne fl	32901	MELBOURNE FL 32901			DO NOT WRITE IN THIS SPACE				
US		US			3. Date Incorporated or Qualified				
						12/02/1997			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				<u>59-3430673</u>		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	8	City & State				6. Election Campaign Financing	\$5.	00 May Be	
23		28				Trust Fund Contribution	Add	ded to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year	<b>→</b>		
24	25	29	30			Intangible Personal Property.	Yes	∐ No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registere	d Agent		
an.	/ 1145010 4 DODDIOON D.A			81 Nar	ne				
	Y, HARRIS & ROBINSON, P.A.		82 Street Addre		et Addre	ess (P.O. Box Number is Not Acceptable)			
	E. PINE STREET, SUITE 1200								
ORLA	NDO FL 32801			83					
				84 City			85	Zip Code	
				OT City		F	L  °° '	Lip Gode	
office or agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was a ions of, section 607.0505, Flo	authorized orida Stat	d by the cutes.	orporatio	ation submits this statement for the purpose of in's board of directors. I hereby accept the app	ointment a	ls registered is registered	
	Signature, typed or printed name of registered agent			red Agent sig	nature requir	red when reinstating) DATE		CTODE IN 12	
12.	OFFICERS AND	<del></del>	13.	n e		ADDITIONS/CHANGES TO OFFICERS A		· · · · · · · · · · · · · · · · · · ·	
TITLE	PD			1.1 TITLE			L Chan	nge Addition	
NAME	CARNEY, RONALD R		1.2 NA					}	
STREET ADDRESS	2200 FRONT ST #300			REET ADORE	SS				
CITY-ST-ZIP	MELBOURNE FL 32901			1.4 CITY-ST-ZIP			<del>\</del>		
TITLE	DVS	L. DELETE			VS		Chan	nge L Addition	
NAME	AMALFITANO, CARLO			2.2 NAME			•		
STREET ADDRESS	2200 FRONT ST #300			2.3 STREET ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32901			2.4 CITY-ST-ZIP			-		
TITLE	TVD	DELETE		3.1 TITLE		/	Chan	nge L Addition	
NAME	GORUSCH, THOMAS E		3.2 NA	ME			-		
STREET ADDRESS	2200 FRONT ST #300		3.3 ST	REET ADDRE	SS			İ	
CITY-ST-ZIP	MELBOURNE FL 32901		3.4 CIT	TY-ST-ZIP					
TITLE		☐ DELETE	4.1 TIT	LE			Chan	nge Addition	
NAME			4.2 NA	ME					
STREET ADDRESS			4.3 \$TI	REET ADDRE	ss			ļ	
CITY-ST-ZIP			4.4 CIT	TY-ST-ZIP				******	
TITLE		DELETE	5.1 TIT	LE			Chan	nge Addition	
NAME			5.2 NA	ME	İ	."			
STREET ADDRESS			5.3 STI	REET ADDRE	ss				
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP					
TITLE		DELETE	6.1 TIT	LE			Chan	nge Addition	
NAME			6.2 NA	ME				ĺ	
STREET ADDRESS			6.3 STI	REET ADDRE	ss			ļ	
CITY-ST-ZIP			6.4 CIT	TY-ST-ZIP					
14. I hereby ce	ertify that the information supplied with t	his filing does not qualify for the	he exemp	tion state	d in secti	ion 119.07(3)(i), Florida Statutes. I further certif	y that the i	nformation	
an officer of	on this annual report or supplemental a or director of the corporation or the rec 2 or Block 13 if changed, or on an atlac	eiver or trustee empowered to	rate and for execute	this repo	gnature s rt as requ	shall have the same legal effect as if made undured by Chapter 607, Florida Statutes; and the	ger oath; that my name	e appears	