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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000003697 1. Corporation Name

NORCROSS TELESERVICES INC.

Principal Pi	ace of	Busi	ness
3535 PIEDMO	ONT RO	DAD.	NE
ATLANTA GA	2020		

Mailing Address

3535 PIEDMONT ROAD, NE ATLANTA GA 30305

FILED May 11, 1999 8:00 am Secretary of State

05-11-1999 90044 021 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

06/29/1998

2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For	
21		26			58-2258548	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 / Fee Re		
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23	-	28			Trust Fund Contribution	Added 1	- 1	
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intan	gible	`	
24	25	29 30	0		Personal Property Tax.	Yes	No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Ag	gent /		
			8	l Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			82	82 Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324		83	83					
			84	City	FL	85 Zip (Code	
44 Durougus	to the provinces of Sections 607 0502	and 607 1508 Florida Statutes	the abov	ve-named co	ornoration submits this statement for the purpose of ch	nanging its	registered	
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.							gistered	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PAS	C DELETE	1.1 TITLE		PRES	Change	☐ Addition	
NAME	WOLK, SIDNEY	<i>/</i> `	1.2 NAME		James Exnest, Riddle		ł	
STREET ADDRESS	4040 MYSTIC VALLEY PARKWAY	Y	1.3 STRE	ET ADDRESS	James Ernest Riddle 3535 Piedmont Rd NE			
CITY-ST-ZIP	BOSTON MA 02155		1.4 CITY-	1	Atlanta, GA 30305			
TITLE	COO	☐ DELETE	2.1 TITL€			Change	☐ Addition	
NAME	PARKER, WILLIAM K		2.2 NAME					
STREET ADDRESS	3535 PIEDMONT ROAD, NE		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	ATLANTA GA 30305		2. 4 CITY-					
TITLE	V	DELETE	31 TITLE			Change	☐ Addition	
NAME	HARRINGTON, DEA		32 NAME		Tom Vadruais 3535 Piedmont RANE			
STREET ADDRESS	4040 MYSTIC VALLEY PARKWAY	Υ	3.3 STRE	ET ADDRESS '	3535 VICAMONIA PAINE			
CITY-ST-ZIP	BOSTON MA 02155		3.4. CITY-	ST-ZIP	Atlanta, GA 30305			
TITLE	VTD	☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME	BRYAN, LARRY J		4, 2 NAM	Ε				
STREET ADDRESS	3535 PIEDMONT ROAD, NE		4.3 STRE	ET ADDRESS			j	
CITY-ST-ZIP	ATLANTA GA 30305		4.4 CITY-	\$T-ZIP				
TITLE	S	☐ DELETE	5.1 TITLE			Change	Addition	
NAME	HAIN, MARK H		5.2 NAME					
STREET ADDRESS	3535 PIEDMONT ROAD, NE		1	ET ADDRESS				
CITY-ST-ZIP	ATLANTA GA 30305		5.4 CITY-			-		
TITLE	AS	DELETE	6.1 TITLE		HS.	Change	☐ Addition	
NAME	WOLK, TED	, ,	6.2 NAME	. 1	Phillip Leslic Whanton			
STREET ADDRESS	4040 MYSTIC VALLEY PARKWAY	Υ		ET ADDRESS	3535 Piedmont Rd NE At langa GA 30305			
CITY-ST-ZIP	BOSTON MA 02155		6.4 CITY-	ST-ZIP	A+ 1AN1+A, 6H 30303	_		

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, with all other like empowered.

SIGNATURE:

Sheet1

545503-90044-21 F98000003697

NAME &ADDRESS, INCLUDING STREET & NUMBERS OF DIRECTORS AND OFFICERS

NORCROSS TELESVCS. INC.	NAME	<u>ADDRESS</u>
DIRECTOR	C. DOUGLAS MILLER	3535 PIEDMONT RD., ATLANTA, GA 30305
PRESIDENT EXEC. VICE PRESIDENT SECRETARY VICE PRESIDENT CHIEF OPERATING OFFICER	JAMES ERNEST RIDDLE LARRY J. BRYAN MARK HAIN TOM VADNAIS WILLIAM K. PARKER	3535 PIEDMONT RD., ATLANTA, GA 30305 3535 PIEDMONT RD., ATLANTA, GA 30305
ASST. SECRETARY	PHILLIP L. WHARTON	3535 PIEDMONT RD ATLANTA GA 30305