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May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J20840

(1)

1. Corporation Name

S.A.C. TELEMARKETING, INC.

Principal Place of Business

100 E GRANADA BLVD
ORMOND BEACH FL 32176
US

Mailing Address

100 E GRANADA BLVD
SUITE 200
ORMOND BEACH FL 32176-6630
US



3. Date Incorporated or Qualified

06/19/1986

3a. Date of Last Report

06/19/1996

2. Principal Place of Business

21 444 SEABREEZE BLVD.

2a. Mailing Address

26 444 Seabreeze Blvd

22 Suite Apt. #, etc.

27 Suite Apt. #, etc.

23 City & State

27 City & State

23 DAYTONA BEACH, FLORIDA

27 DAYTONA BEACH, FL

24 Zip

29 Zip

24 32118

29 32118

Country

25 USA

Country

30 USA

9. Name and Address of Current Registered Agent

DANIELS, DOUGLAS A.
406 N. WILD OLIVE AVE.
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

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

TITLE PD ☐ DELETE

NAME BECKMANN, JAMES G
STREET ADDRESS 755 SANDY HILL CIRCLE
CITY-ST-ZIP PORT ORANGE FL

TITLE V ☐ DELETE

NAME SIMMS, LEE ANN
STREET ADDRESS 1299 FERNWAY DR.
CITY-ST-ZIP ORMOND BEACH FL

TITLE D ☐ DELETE

NAME HERMAN, PHILIP A.
STREET ADDRESS 109 ANCHORAGE DR. SOUTH
CITY-ST-ZIP N PALM BEACH FL

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 included 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

4/30/97
Date

804-272-2202
Daytime Phone #

CR2E034 (9/96)