FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J48780 (7)

1. Corporation Name
GULF HIGHLANDS BEACH PRIVATE TELEPHONE COMPANY

Principal Place of Business
10997 MIDDLE BCH RD
PANAMA CITY FL 32407

Mailing Address
10997 MIDDLE BCH RD
PANAMA CITY FL 32407

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/24/1986
3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-2761037 — Applied For / Not Applicable
5. Certificate of Status Desired [X] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes [X] Yes [ ] No

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc. 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___
2a. Mailing Address: 26 ___ Suite, Apt. #, etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent
KOLK, JACALYN N, ESQI
1610 BECK AVE
PANAMA CITY FL 32405

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 ______

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WATSON, JOHN F
STREET ADDRESS	10997 MIDDLE BCH RD
CITY ST ZIP	PANAMA CITY BCH FL
TITLE	VD
NAME	ALVORD, MICHAEL L
STREET ADDRESS	10997 MIDDLE BCH RD
CITY ST ZIP	PANAMA CITY BCH FL
TITLE	TD
NAME	GEIL, EARL H
STREET ADDRESS	10997 MIDDLE BCH RD
CITY ST ZIP	PANAMA CITY BCH FL
TITLE	S
NAME	CULLEN PATTY
STREET ADDRESS	10997 MIDDLE BCH RD
CITY ST ZIP	PANAMA CITY BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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	S	[X] Change [ ] Addition
4.2 NAME	SIMMERSON, LISA	
4.3 STREET ADDRESS	10997 MIDDLE BEACH RD	
4.4 CITY ST ZIP	PANAMA CITY BEACH, FL 32407	
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 is voluntarily furnished and 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: Earl H. Geil Director — 4/27/95 — 904-233-2133

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0001875 CP