

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J60061

FILED  
Jul 12, 2007  
Secretary of State

Entity Name: CITY TELEPHONE COMPANY

**Current Principal Place of Business:**

453 WEST PALM AIRE DRIVE  
POMPANO BEACH, FL 33069 US

**New Principal Place of Business:**

**Current Mailing Address:**

CITY TELEPHONE CO.  
P.O. BOX 667045  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

FEI Number: 65-0104662      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WHITAKER, PHIL  
453 W. PALM AIVE DRIVE  
POMPANO BEACH, FL 33069 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WHITAKER, PHIL  
Address: 453 W. PALM AIVE DR.  
City-St-Zip: POMPANO BCH, FL 33069

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: WHITAKER, PHIL  
Address: 453 W. PALM AIVE DR.  
City-St-Zip: POMPANO BCH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHIL WHITAKER

PRES

07/12/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date