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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J72879

(6)

Principal Place of Business Mailing Address % WILLIAM R. DIXON % WILLIAM R. DIXON 3288 DESERT STREET 3288 DESERT STREET PENSACOLA FL 32514 PENSACOLA FL 32514 2. Principal Place of Business 2a. Mailing Address

FILED Apr 01 1998 8:00am Secretary of State

OLD TIME TELEPHONE SERVICE OF PENSACOLA, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/15/1987 4. FEI Number Applied For 59-2809317 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, otc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 \Box Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name DIXON, WILLIAM R. 3288 DESERT STREET 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32514 64 City Zip Code 85 11. Pursuant to the provisions of Socions 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, Socion 607.0505, Florida Statutes. **SIGNATURE** Signature typed or pointed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE __ DELETE Change ☐ Addition DIXON, WILLIAM R. NAME 1.2 NAME CR2E034 3288 DESERT STREET STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 21 TITLE Change Addition TITLE DIXON, ALICE C. NAME 2.2 NAME 3288 DESERT STREET STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change ___ Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 angual report or suppliemental 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 in hanged, or on an attachment with an address. iged, or on an attachment with an address.

SIGNATURE

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