

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

FILED
Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J82718 (4)
1. Corporation Name
RIDGE TELECOM, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 642 S COMMERCE AVE SEBRING FL 33870 US		Mailing Address 642 S COMMERCE AVE SEBRING FL 33870 US	
2. Principal Place of Business 21 1107 WEIGLE AVE Suite, Apt. #, etc. 22 City & State 23 SEBRING FL Zip 24 33870 Country 25 FLORIDA		2a. Mailing Address 26 1107 WEIGLE AVE Suite, Apt. #, etc. 27 City & State 28 SEBRING FL Zip 29 33870 Country 30 FLORIDA	
3. Date Incorporated or Qualified 07/15/1987		4. FEI Number 59-2887402 Applied For Not Applicable	
5. Certificate of Status Desired \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No			

g. Name and Address of Current Registered Agent MCLEAN, DOUGLAS A. 300 N. CIRCLE AVE SEBRING FL 33870		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYBARGER, BRUCE J. P O BOX 1102 N/A SEBRING FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DIRECTOR/PRESIDENT KELSEY PAYNE 9410 PAYNE RD SEBRING FL 33872
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEITH, JEFFOERY S. 1010 15TH AVE. SEBRING FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCLEAN, DOUGLAS A. 2707 GREENACRE DR. SEBRING FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HURLEY, JAMES P. P O BOX 3875 N/A SEBRING FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEAL, ROBERT 1107 WEIGLE AVENUE SEBRING FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOKES, BARNEY P O BOX 1208 N/A SEBRING FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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.

SIGNATURE:  JEFF S. KEITH 2/6/98 (941) 382-2800

CR2-024 (1097)