

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

FILED

Jan 30 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 # **M71676** (4)
1. Corporation Name
FREY COMMUNICATIONS SOUTH, INC.

Principal Place of Business 631 2ND AVENUE SOUTH NASHVILLE TN 37210 US	Mailing Address 631 2ND AVENUE SOUTH NASHVILLE TN 37210 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/14/1988	
21		26		4. FEI Number 59-2879761	Applied For Not Applicable
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				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

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				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DPC	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	BROWN, CHARLES			1.2 NAME			
STREET ADDRESS	631 2ND AVENUE SOUTH			1.3 STREET ADDRESS			
CITY-ST-ZIP	NASHVILLE TN 37210			1.4 CITY-ST-ZIP			
TITLE	DVP	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	MACARTT, E.M.			2.2 NAME			
STREET ADDRESS	631 2ND AVENUE SOUTH			2.3 STREET ADDRESS			
CITY-ST-ZIP	NASHVILLE TN 37210			2.4 CITY-ST-ZIP			
TITLE	DS	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	HAMILTON, VIVIAN L			3.2 NAME			
STREET ADDRESS	631 2ND AVENUE SOUTH			3.3 STREET ADDRESS			
CITY-ST-ZIP	NASHVILLE TN 37210			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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:

Charles C Brown 1/13/98 (615) 248 9986

CR2E034 (10/97)