FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

FILED
97 MAY -1 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N17880** **(8)**

1. Corporation Name
VOCAL, INC.

Principal Place of Business	Mailing Address
C/O PATRICIA E. COOK 113 LEWIS DRIVE PERRY FL 32347 US	C/O PATRICIA E. COOK 113 LEWIS DRIVE PERRY FL 32347-6125 US

3. Date Incorporated or Qualified: 11/20/1986
3a. Date of Last Report: 03/13/1996

2. Principal Place of Business	2a. Mailing Address
21 1173 Sunlight Court	26 1173 Sunlight Court
Suite, Apt. #, etc. 22 St Cloud Fla	Suite, Apt. #, etc. 27 1173 Sunlight Court
City & State 23 St Cloud Fla	City & State 28 St Cloud Fl
Zip 24 34770 Country 25 USA	Zip 29 34770 Country 30 USA

4. FEI Number: 59-2739414 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

COOK, PATRICIA E
113 LEWIS DR
PERRY FL 32347

10. Name and Address of New Registered Agent

61 Name: Peggy Leopold
62 Street Address (P.O. Box Number is Not Acceptable): 1173 Sunlight Court
63 1173 Sunlight Court
64 City: St Cloud FL 65 Zip Code: 34770

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Patricia E. Cook 4-30-97
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	PD PRES + Sec/Treas	☐ DELETE	1.1 TITLE	VPD ☑ Change ☐ Addition
NAME	LEOPOLD, PEGGY		1.2 NAME	Bob Leopold
STREET ADDRESS	~~1169 SUN LIGHT COURT~~ 1173 Sunlight Court		1.3 STREET ADDRESS	1173 Sunlight Count
CITY-ST-ZIP	ST. CLOUD FL 34770		1.4 CITY-ST-ZIP	St Cloud Fl 34770
TITLE	VPD	☑ DELETE	2.1 TITLE	Director ☑ Change ☐ Addition
NAME	COOK, PATRICIA E		2.2 NAME	PATRICIA E Cook
STREET ADDRESS	113 LEWIS DR.		2.3 STREET ADDRESS	113 LEWIS DR
CITY-ST-ZIP	PERRY FL 32347		2.4 CITY-ST-ZIP	PERRY FL 32347
TITLE	SD	☑ DELETE	3.1 TITLE	DIRECTOR ☐ Change ☑ Addition
NAME	LEOPOLD, BOB		3.2 NAME	Rick Henjum
STREET ADDRESS	1169 SUN LIGHT COURT		3.3 STREET ADDRESS	1203 N. 31st
CITY-ST-ZIP	ST. CLOUD FL 34770		3.4 CITY-ST-ZIP	Hollywood Fl 33201
TITLE	D	☐ DELETE	4.1 TITLE	Director ☐ Change ☑ Addition
NAME	DAY, WYNONA		4.2 NAME	William Steele
STREET ADDRESS	413 63RD AVENUE W.		4.3 STREET ADDRESS	2628 Chumleigh Circle
CITY-ST-ZIP	BRADENTON FL 33509		4.4 CITY-ST-ZIP	Tallahassee Fla 32308
TITLE	~~Director~~	☐ ~~Delete~~	5.1 TITLE	Director ☐ Change ☑ Addition
NAME	~~Rick Henjum~~		5.2 NAME	Betty Travers
STREET ADDRESS	~~Hollywood~~		5.3 STREET ADDRESS	1173 Sunlight Court St Cloud Fl
CITY-ST-ZIP	~~Fla~~		5.4 CITY-ST-ZIP	Ft Walton Bch Fl 34770
TITLE	Director	☐ Delete	6.1 TITLE	☐ Change ☐ Addition
NAME	Betty Travers		6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	Ft Walton Bch Fla		6.4 CITY-ST-ZIP	

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14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Patricia E. Cook 4-30-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0009091