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

PROFIT CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P05261 (3)AMERICAN MOBILPHONE PAGING, INC. Principal Place of Business Mailing Address 2600 INSURANCE CENTER DR 942 SHELTON BEACH ROAD EXTENSION

## **FILED** May 08 1997 8:00am Secretary of State

2. Principal Place of Business 2. Mailing Address 2. Sulte, Apt. #, etc. 3. Sulte, Apt. #, etc. 4. Sulte, Apt. #, etc. 3. Sulte, Apt. #, etc. 4. Sulte, Apt. #,	
2510 Lakeland Terrace  Sulte, Apt. #, etc.  Sulte,	326818 Not Applicable stee of Status Desired Status Desired Fee Required
Sulte, Apt. #, etc.  Sulte, Apt. #, etc.  Sulte 200  Su	ale of Status Desired Sa.75 Additional Fee Required
City & State  City & State  Zip  Country  B. This core Florida Statutes  PICTURE, EILEEN  1 SOUTH A STREET  STE. 203  PENSACOLA FL 32501  B1  Name  Markow, Greg  B2  Street Address (P.O. Box In Street Agent)  B3  City  Pensacola  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of agent. I am tarphier with, and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE  Signature, typed or printed manne of legisfored agent and life if application  Signature, typed or printed manne of legisfored agent and life if application  NOTE Registored Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITION  TITLE  PC  NAME  YERGER, WIRT A  STREET ADDRESS  2510 Lake  GITY-SI-ZIP  JACKSON MS 39216	Fee Required
City & State  23  City & State  24  Zip  Country  Zip  Country  Zip  Signature and Address of Current Registered Agent  PICTURE, EILEEN  1 SOUTH A STREET  STE. 203  PENSACOLA FL 32501  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of a agent. I am largifier with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of a agent. I am largifier with, and accept the obligations of, Section 607.0505, Florida Statutes,  SIGNATURE  Signature, typed or pinited name of legistered agent and life if applicable  Signature, typed or pinited name of legistered agent and life if applicable  RICHE PC  NAME  STREET ADDRESS  ZERO INSURANCE CENTER DR, SUITE 200A  1.3 STREET ADDRESS  ZERO INSURANCE CENTER DR, SUITE 200A  1.4 CITY-SI-ZIP  TITLE  VT  L DELETE  21 TITLE  VT	Campaign Financing \$5.00 May Ba
Zip Country Zip Gountry 8. This cor Florida Salar Part    2	
9. Name and Address of Current Registered Agent PICTURE, EILEEN 1 SOUTH A STREET STE. 203 PENSACOLA FL 32501  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of agent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTL Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS 13. ADDITION  TITLE PC NAME YERGER, WIRT A STREET ADDRESS 2600 INSURANCE CENTER DR, SUITE 200A 1.3 STREET ADDRESS CITY-ST-ZIP JACKSON MS 39216  1. DELETE 21 TITLE  VT  DELETE 21 TITLE  VT  DELETE 21 TITLE  1.1 LITLE 21 TITLE  VT  DELETE 21 TITLE 21 TITLE  VT  DELETE 21 TITLE 21 TITLE  1.1 LITLE 21 TITLE 21 TITL	Ind Contribution
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PICTURE, EILEEN 1 SOUTH A STREET STE. 203 PENSACOLA FL 32501  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of agent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, typed or pinted name of registered agent and life if applicable (NOTL Registered Agent signature required when reinstating).  12. OFFICERS AND DIRECTORS 13. ADDITION  TITLE PC NAME YERGER, WIRT A STREET ADDRESS CITY-ST-ZIP JACKSON MS 39216  1.3 STREET ADDRESS CITY-ST-ZIP JACKSON MS 39216  1.4 CITY-ST-ZIP Mark Markow, Greg Markow, Genes Markow, Greg Markow, Greg Markow, Greg Markow, Greg Mark	and Address of New Registered Agent
The provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of agent. I am farmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and trie if applicate.  OFFICERS AND DIRECTORS  13. ADDITION  TITLE  PC  DELETE  1.1 ITILE  YERGER, WIRT A  STREET ADDRESS  2800 INSURANCE CENTER DR, SUITE 200A  1.3 STREET ADDRESS  2510 Lake  GITY-51-ZIP  JACKSON MS 39216	
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SIGNATURE   Signature, typed or printed name of registered agent and life if applicated. (NOTE Registered Agent signature required when reinstating)   12. OFFICERS AND DIRECTORS   13. ADDITION   17TLE   PC	e this eleterant for the purpose of changing its registered
SIGNATURE   Signature, typed or printed name of registered agent and life if applicated. (NOTE Registered Agent signature required when reinstating)   12. OFFICERS AND DIRECTORS   13. ADDITION   17TLE   PC	arrectors, i nereby accept the appointment as registered
12. OFFICERS AND DIRECTORS 13. ADDITION  TITLE PC NAME YERGER, WIRT A STREET ADDRESS 2600 INSURANCE CENTER DR, SUITE 200A TITLE VT  TITLE VT  DELETE 1.1 TITLE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 2510 Lake 1.4 CITY-S1-ZIP 251 TITLE  VT  DELETE 2.1 TITLE 2.1 TITLE  VT  L  DELETE 2.1 TITLE  VERGER, WIRT A 2.5 TITLE  VT  L  DELETE 2.1 TITLE  VT  L  DELETE 2.1 TITLE  VERGER, WIRT A 2.5 TITLE  VERGER, WIRT A 4.5 TIT	4/30/9/
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TITLE VT DELETE 2.1 TITLE .	land Terrace, Suite 200
	1 X Change Addition
NAME MARKOW, GREGORY D	- J- cumbe C1 working
ARRA MALIDANAS OFASTO DO ALIST ARRA	1 1
HAMANIAN ANALA	land Terrace, Suite 200
CITY-ST-ZIP	Change Addition
NAME THOMAS, JAMES T 32 NAME	En summer Ch Worlkon
STREET ADDRESS 248 EAST CAPITOL STREET, SUITE 1400 33 STREET ADDRESS	
11 414 414 114 414 114 114 114 114 114	
CITY-ST-ZIP	Change Addition
NAME FLOWERS, R.H. III	
STREET ADDRESS 117 ROBINWOOD LANE 4.3 STREET ADDRESS	
CITY-ST-ZIP RIDGELAND MS 39157 4.4 CITY-ST-ZIP	
TITLE D DELETE 5.1 TITLE	Change Addition
NAME FRAZIER, WILLIAM D 52 NAME	
STREET ADDRESS 4338 REGENCY COURT 5.3 STREET ADDRESS	
CITY-ST-ZIP JACKSON MS 39211 5.4 CITY-ST-ZIP	
TITLE D DELETE 61TITLE	
NAME THOMAS, WILLIAM P 62 NAME	☐ Change ☐ Addition
STREET ADDRESS ROUTE 1, BOX 55	☐ Change ☐ Addition
CITY-ST-ZIP CRUGER MS 38924	☐ Change ☐ Addition
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 Information indicated on this annual report or supplemental annual report is true and accurate and that my signatures I am an officer or director of the corporation or the receiver on rustee empowered to execute this report as required by	

appears in Block 12 or Block 13 if changed, or on an attachmen with an address.

SIGNATURE:

4-30-97 601-362-3333