

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90160 011 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P10620

1. Corporation Name

CUMULUS FIBRES OF FLORIDA, INC.

MAIL



Principal Place of Business

5601 NW 35TH AVE
MIAMI FL 33142

Mailing Address

5601 NW 35TH AVE
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26 No. 1 Leggett Road		07/02/1986	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27 P.O. Box 757		59-2633963	
City & State		City & State		Applied For	
23		28 Carthage, Mo		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		29 64836		30 USA	
Country		Country		8. Election Campaign Financing	
25		30		Trust Fund Contribution	
26		31		8. This corporation owes the current year Intangible	
27		32		Personal Property Tax.	
28		33		Yes No	
29		34		8.75 Additional	
30		35		Fee Required	
31		36		5.00 May Be	
32		37		Added to Fees	
33		38			
34		39			
35		40			
36		41			
37		42			
38		43			
39		44			
40		45			
41		46			
42		47			
43		48			
44		49			
45		50			
46		51			
47		52			
48		53			
49		54			
50		55			
51		56			
52		57			
53		58			
54		59			
55		60			
56		61			
57		62			
58		63			
59		64			
60		65			
61		66			
62		67			
63		68			
64		69			
65		70			
66		71			
67		72			
68		73			
69		74			
70		75			
71		76			
72		77			
73		78			
74		79			
75		80			
76		81			
77		82			
78		83			
79		84			
80		85			
81		86			
82		87			
83		88			
84		89			
85		90			
86		91			
87		92			
88		93			
89		94			
90		95			
91		96			
92		97			
93		98			
94		99			
95		100			

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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	VSD	1.1 TITLE	V
NAME	FURR, WILLIAM P	1.2 NAME	William P. Furr
STREET ADDRESS	2900D I-85 S SERVILE RD	1.3 STREET ADDRESS	2900 D I-85 S. Service Road
CITY-ST-ZIP	CHARLOTTE NC 28208	1.4 CITY-ST-ZIP	Charlotte, NC 28208
TITLE	PTD	2.1 TITLE	P
NAME	STEAGALL, DARRELL C	2.2 NAME	Dannell C Steagall
STREET ADDRESS	2900D I-85 S SERVILE RD	2.3 STREET ADDRESS	2900 D I-85 S. Service Road
CITY-ST-ZIP	CHARLOTTE NC 28208	2.4 CITY-ST-ZIP	Charlotte, NC 28208
TITLE		3.1 TITLE	DSV
NAME		3.2 NAME	Ernest C. Jett
STREET ADDRESS		3.3 STREET ADDRESS	No. 1 Leggett Road
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Carthage, Mo 64836
TITLE		4.1 TITLE	V
NAME		4.2 NAME	Kenneth W. Purser
STREET ADDRESS		4.3 STREET ADDRESS	No. 1 Leggett Road
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Carthage, Mo 64836
TITLE		5.1 TITLE	T
NAME		5.2 NAME	Sheri L. Bradshaw
STREET ADDRESS		5.3 STREET ADDRESS	No. 1 Leggett Road
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Carthage, Mo 64836
TITLE		6.1 TITLE	V
NAME		6.2 NAME	Robert A. Jeffries, Jr.
STREET ADDRESS		6.3 STREET ADDRESS	No. 1 Leggett Road
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Carthage, Mo 64836

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, with all other like empowered.

SIGNATURE:

Kenneth W. Purser - Vice President

Date

Daytime Phone #

CR2E034 (11/98)