


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

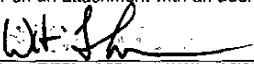
FILED
May 11, 1999 8:00 am
Secretary of State

05-11-1999 90035 035 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P11407					
1. Corporation Name ELCOTEL, INC.					
Principal Place of Business 6428 PARKLAND DRIVE SARASOTA FL 34243			Mailing Address 6428 PARKLAND DRIVE SARASOTA FL 34243		
2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 09/10/1986	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 59-2518405	
City & State 23		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24		Zip 29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 25		Country 30		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent GRAY, TRACEY L 6428 PARKLAND DRIVE SARASOTA FL 34243			10. Name and Address of New Registered Agent 81 Name CT Corporation Systems 82 Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road 83 84 City Plantation FL 85 Zip Code 33324		
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					
TITLE	VT	<input checked="" type="checkbox"/> DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	TOBIN, RONALD M			1.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	6466 SWEETMEADOW CT			1.2 NAME	Thompson, William H.
CITY-ST-ZIP	SARASOTA FL			1.3 STREET ADDRESS	6428 Parkland Drive
				1.4 CITY-ST-ZIP	Sarasota, FL 34243
TITLE	PD	<input type="checkbox"/> DELETE		2.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAY, TRACEY L			2.2 NAME	Gray, Tracey L.
STREET ADDRESS	5818 LONGBOAT BLVD			2.3 STREET ADDRESS	6428 Parkland Drive
CITY-ST-ZIP	TAMPA FL			2.4 CITY-ST-ZIP	Sarasota, FL 34243
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, CHARLES H			3.2 NAME	Moore, Charles H.
STREET ADDRESS	630 HIGHLAND RD			3.3 STREET ADDRESS	6428 Parkland Drive
CITY-ST-ZIP	ITHACA NY 14850			3.4 CITY-ST-ZIP	Sarasota, FL 34243
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTON, THOMAS E.			4.2 NAME	Patton, Thomas E.
STREET ADDRESS	1178 HUNTOVER CT.			4.3 STREET ADDRESS	6428 Parkland Drive
CITY-ST-ZIP	MCLEAN VA			4.4 CITY-ST-ZIP	Sarasota, FL 34243
TITLE	CD	<input type="checkbox"/> DELETE		5.1 TITLE	CD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES, C SHELTON			5.2 NAME	James, C. Shelton
STREET ADDRESS	310 E ROYAL PALM RD			5.3 STREET ADDRESS	6428 Parkland Drive
CITY-ST-ZIP	BOCA RATON FL			5.4 CITY-ST-ZIP	Sarasota, FL 34243
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME				6.2 NAME	Jacobs, Joseph M.
STREET ADDRESS				6.3 STREET ADDRESS	6428 Parkland Drive
CITY-ST-ZIP				6.4 CITY-ST-ZIP	Sarasota, FL 34243

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:

 William H. Thompson

4/30/99
Date

841-758-0389
Daytime Phone #

CR2E034 (11/98)

5 45067-90035-35
P11407

Additional Directors

D
Plaumann, Mark L.
6428 Parkland Drive
Sarasota, FL 34243

D
Steadman, David R.A.
6428 Parkland Drive
Sarasota, FL 34243