FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 19 AM 1:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000080774 (1)**

1. Corporation Name

CONTINENTAL TELEPORT CORP. OF FLORIDA

Principal Place of Business	Mailing Address
5604 RICHARD ST JACKSONVILLE FL 32216	5604 RICHARD ST JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE:

3. Date Incorporated or Qualified: 11/23/1993
3a. Date of Last Report: 03/17/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27

City & State — 23 / 28

Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: APPLIED FOR 59-3218202 ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
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 **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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D/C	☒ Change ☐ Addition
NAME	HOSTETTER, AMOS B.	1.2 NAME		
STREET ADDRESS	THE PILOT HOUSE, LEWIS WHART	1.3 STREET ADDRESS	The Pilot House, Lewis Wharf	
CITY-ST-ZIP	BOSTON MA	1.4 CITY-ST-ZIP		
TITLE	D	2.1 TITLE	P	☒ Change ☐ Addition
NAME	RITTER, MICHAEL J.	2.2 NAME	William T. Schleyer	
STREET ADDRESS	THE PILOT HOUSE, LEWIS WHART	2.3 STREET ADDRESS	The Pilot House, Lewis Wharf	
CITY-ST-ZIP	BOSTON MA	2.4 CITY-ST-ZIP	Boston, MA 02110	
TITLE	D	3.1 TITLE	D/S	☒ Change ☐ Addition
NAME	DUNHAM, W. LEE	3.2 NAME		
STREET ADDRESS	ONE POST OFFICE SQUARE	3.3 STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA	3.4 CITY-ST-ZIP		
TITLE	V	4.1 TITLE		☒ Change ☐ Addition
NAME	HOFFSTEIN, RICHARD	4.2 NAME		
STREET ADDRESS	THE PILOT HOUSE, LEWIS WHART	4.3 STREET ADDRESS	The Pilot House, Lewis Wharf	
CITY-ST-ZIP	BOSTON MA	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE	V/T	☐ Change ☒ Addition
NAME		5.2 NAME	Krauss, Eric	
STREET ADDRESS		5.3 STREET ADDRESS	The Pilot House, Lewis Wharf	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Boston, MA 02110	
TITLE		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 do hereby certify that the information supplied with this filing is voluntarily furnished and 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: _____ 4/10/95 (617)742-6140
SIGNATURE AND TYPED OR PRINTED NAME OF RUNNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number
Richard A. Hoffstein

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