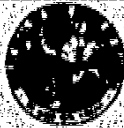


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 19 AM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000080774 (1)**

1. Corporation Name

CONTINENTAL TELEPORT CORP. OF FLORIDA

Principal Place of Business

**500 RICHARD ST
JACKSONVILLE FL 32218**

Mailing Address

**500 RICHARD ST
JACKSONVILLE FL 32218**

DO NOT WRITE IN THIS SPACE:

3. Date Incorporated or Qualified
11/23/1993

3a. Date of Last Report
03/17/1994

4. FBI 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. 190.002,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when nonattesting)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**HOSTETTER, AMOS B.
THE PILOT HOUSE, LEWIS WHART
BOSTON MA**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**RITTER, MICHAEL J.
THE PILOT HOUSE, LEWIS WHART
BOSTON MA**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

**DUNHAM, W. LEE
ONE POST OFFICE SQUARE
BOSTON MA**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

**HOFFSTEIN, RICHARD
THE PILOT HOUSE, LEWIS WHART
BOSTON MA**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

D/C

☒ Change ☐ Addition

The Pilot House, Lewis Wharf

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

P

☒ Change ☐ Addition

**William T. Schleyer
The Pilot House, Lewis Wharf
Boston, MA 02110**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

D/S

☒ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

The Pilot House, Lewis Wharf

☒ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

V/T

☐ Change ☒ Addition

**Krauss, Eric
The Pilot House, Lewis Wharf
Boston, MA 02110**

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard A. Hoffstein

4/10/95

(617)-742-6140