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FILED  
Apr 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000030340 (1)

1. Corporation Name

COMMUNICATIONS BY CHOICE, INC.

Principal Place of Business

Mailing Address

16394 E HILEAH DR  
LOZAHATCHEE FL 33470-3727  
US

80 W PALM DRIVE  
MARGATE FL 33063-4551

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1994

4. FEI Number

65-0489807

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

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 2137 N. COURSEWAY HWY 26 2137 N. COURSEWAY HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 34

27 34

City & State

City & State

23 MERRITT ISLAND, FL

28 MERRITT ISLAND, FL

Zip

Country

Zip

Country

24 32953

25

29 32953

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILL, GEOFFREY C  
80 W PALM DRIVE  
MARGATE FL 33063  
2137 N. COURSEWAY PARKWAY  
MERRITT ISLAND, FL 32953

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME GILL, GEOFFREY C  
STREET ADDRESS 80 W PALM DRIVE  
CITY-ST-ZIP MARGATE FL 33063-4551

TITLE S  
NAME GILL, HAZEL D  
STREET ADDRESS 80 W PALM DR  
CITY-ST-ZIP MARGATE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

D, S ☒ Change ☐ Addition

☐ Change ☐ Addition

P, D ☐ Change ☒ Addition

DENNIS CHAMBERS  
2137 N. COURSEWAY HWY  
MERRITT ISLAND, FL 32953  
☐ Change ☒ Addition

V, D ☐ Change ☒ Addition

TIMOTHY MURRAY  
2137 N. COURSEWAY PARKWAY  
MERRITT ISLAND, FL 32953  
☐ Change ☒ Addition

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\*\*\*150.00  
FL 4.8

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.

SIGNATURE: Geoffrey C. Gill Sec 3/24/98 407-455-1600

CR2E034 (10/97)