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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000040917 (4)

DOCUMENT #
1. Corporation Name INTOUCH COMMUNICATIONS OF S.W. FLORIDA, INC.

Principal Place of Business

Mailing Address



4324 WEST 3RD ST. LEHIGH FL 33971			4324 WEST 3RD ST. LEHIGH FL 33971								
							3. Date Incorpor 06/01/1		3a. Date	of Last I 05/01/	
21	Place of Business	2a. 26	Mailing Address				4. FEI Number 65-04	99383	·		Applied For Not Applicable
Suite, Apt		27	Suite, Apt. #, etc.				5. Certificate of	Status Desired	IJ		5 Additional Required
City & Sta		28	City & State				6. Election Cam Trust Fund Co	-			00 May Be ad to Fees
Ζιρ <b>24</b>	Country 25	29	Zip	30 Co.	untry	·-··	Florida Statut	_	🔀 No		199.032,
	9. Name and Address of Cur	rent Registe	red Agent		04	<del></del>	10. Name and A	ddress of New R	egistered /	gent	
CUIT	LI SAMILIANA PO				81	Name					
SMITH, WILLIAM R 8191 COLLEGE PARKWAY SUITE 300						Street Ao	dress (P.O. Box Number is Not Acceptable)				
	MYERS FL 33919				В3						
	to the provisions of Sections 607.05				84	City			FL		ip Code
	ered agent, or both, in the State of Fi with, and accept the obligations of, Se Signature, typed or proted name of registered ag	ection 607.05	605, Florida Statutes	eo by the t	corpo	oration's bo	eard of directors, I heret	by accept the appo	pintment as	registere	d agent. I am
10						code o cue redo			DATE		
12.	OFFICERS A	AND DIRECT	ORS	13.				HANGES TO DEED	CEDS AND	DIDECTO	ODC INL10
TITLE	D OFFICERS,	AND DIRECT	ORS DELETE	<b>13.</b>	IITLE			HANGES TO OFFI			
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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.

IGNATURE:

| Signature and tryped or Printed Name of Signing Officer or Directors
| Signature and tryped or Printed Name of Signing Officer or Directors
| Signature and tryped or Printed Name of Signing Officer or Directors
| Director | Directors | Director | Directors | Director | Directo