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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000044660 (6)

1. Corporation Name

INN-TEL, INC.



Principal Place of Business

Mailing Address

5160 SE 26 STREET
OCALA FL 34471

5160 SE 26 STREET
OCALA FL 34471

2. Principal Place of Business

2a. Mailing Address

21 Inn-TEL inc

26 INNTEL inc

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 2331 SE 62nd St

27 2331 SE 62nd St

City & State

City & State

23 Ocala, Florida

28 Ocala, Florida

Zip

Zip

24 34480

29 34480

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, JAMES T III
5160 SE 26 STREET
OCALA FL 34471

81 Name O'NEAL William R.

82 Street Address (P.O. Box Number is Not Acceptable)

2331 SE 62nd St.

83

84 City

Ocala

FL

85 Zip Code

34480

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

William R. O'Neal president

4-30-96

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

NOTE: Registered Agent signature required when reinstating.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP
NAME ONEAL, WILLIAM R
STREET ADDRESS 2331 SE 62nd STREET
CITY-ST-ZIP Ocala FL 34480

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE O'Neal William R (P)
1.2 NAME President
1.3 STREET ADDRESS 2331 SE 62nd St
1.4 CITY-ST-ZIP Ocala, Florida 34480

2.1 TITLE Secretary (S)
2.2 NAME Kathy O'Neal
2.3 STREET ADDRESS 2331 SE 62nd St
2.4 CITY-ST-ZIP Ocala, Florida 34480

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

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)(k), 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:

William R. O'Neal president

Date:

4-30-96

352-

368-1962

Daytime Phone #

CR2E034 (12/95)