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FILED

Feb 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000061533 (3)

1. Corporation Name  
TELEMAR SERVICES INC.



Principal Place of Business  
P.O. BOX 1283  
INDIAN ROCKS BEACH FL 34635-1283

Mailing Address  
P.O. BOX 1283  
INDIAN ROCKS BEACH FL 33785-1283

3. Date Incorporated or Qualified  
08/22/1994

3a. Date of Last Report  
04/17/1996

4. FEI Number  
59-3266968

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

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

2. Principal Place of Business  
21 P.O. Box 1283  
Suite, Apt. #, etc.

2a. Mailing Address  
26 P.O. Box 1283  
Suite, Apt. #, etc.

22 City & State  
23 Indian Rocks Beach, FL  
Zip Country

27 City & State  
28 Indian Rocks Beach, FL  
Zip Country

24 33785-1283 25 29 33785-1283 30

9. Name and Address of Current Registered Agent

TOOMEY, DONALD L  
13681 CROFT DR S  
LARGO FL 34644

10. Name and Address of New Registered Agent

81 Name  
Toomey, Donald L.

82 Street Address (P.O. Box Number is Not Acceptable)  
13681 Croft Drive South

83

84 City  
Largo FL

85 Zip Code  
33774

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE  
NAME TOOMEY, DONALD L  
STREET ADDRESS 13681 CROFT DRIVE SOUTH  
CITY-ST-ZIP LARGO FL 34644

TITLE S ☐ DELETE  
NAME TOOMEY, B. JEAN  
STREET ADDRESS 13681 CROFT DRIVE SOUTH  
CITY-ST-ZIP LARGO FL 34644

TITLE VP ☐ DELETE  
NAME FULLER, CHRISTOPHER J  
STREET ADDRESS 501 BLAIRSTONE RD., #2903  
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition  
1.2 NAME Toomey, Donald L.  
1.3 STREET ADDRESS 13681 Croft Drive South  
1.4 CITY-ST-ZIP Largo, FL 33774

2.1 TITLE S ☒ Change ☐ Addition  
2.2 NAME Toomey, B. Jean  
2.3 STREET ADDRESS 13681 Croft Drive South  
2.4 CITY-ST-ZIP Largo, FL 33774

3.1 TITLE VP ☒ Change ☐ Addition  
3.2 NAME Fuller, Christopher J.  
3.3 STREET ADDRESS 10263 Gandy Blvd. N. Apt. 2304  
3.4 CITY-ST-ZIP St. Petersburg, FL 33702

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

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

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

14. I do 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: *Donald L. Toomey* 2/17/97 (813) 595-5155  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)