

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000065385 (4)

1. Corporation Name:

TELEPHONE & DATA INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN - 2 11 01 35

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/30/1994** 3a. Date of Last Report

4. FEI Number **65-0514569** 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23

28

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LOWERY, PAMELA S
1402 NE 10TH TER
CAPE CORAL FL 33909**

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

76011 Registered Agent Captions required when registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP**
NAME **LOWERY, PAMELA S**
STREET ADDRESS **1402 NE 10TH TER**
CITY, ST, ZIP **CAPE CORAL FL 33909**

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

☐ Change ☐ Addition

TITLE **DST**
NAME **LOWERY, ROBERT**
STREET ADDRESS **1402 NE 10TH TER**
CITY, ST, ZIP **CAPE CORAL FL 33909**

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3.1 TITLE
3.2 NAME
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3.4 CITY, ST, ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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 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:

Pamela S. Lowery
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-95
Date

813
772-8935
Extension (Area #)

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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000066480 (2)

1. Corporation Name

HISTORIC ALTERNATIVES, INC.

Principal Place of Business

1216 COONTIE CT
FT LAUDERDALE FL 33312

Mailing Address

P.O. BOX 1723
FT LAUDERDALE FL 33302-1723

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/06/1994

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0519450

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

21

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