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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P94000073163 (5)

DOCUMENT #

1. Corporation Name COMMUNICATIONS CONSULTING GROUP, INC.



	Business	Mailing Address			
620 VIRGINIA B ORLANDO FL 3	12803 725 Manlana	SE 520 VIRGINIA DR., ST ORLANDO FL 32803	TE. B	and a Qualitad	3a. Date of Last Report
				3. Date incorporated or Qualified 10/01/1994	04/27/1995
				4. FEI Number	Applied For
. Principal Place	of Business	2a, Mailing Address	a st.	59-3274199	Not Applicable
725 / Suite, Apt. #, e	montana St.	26 725 Montas Suite, Apt. #, etc.	NR GC.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		27		6. Election Campaign Financing	\$5.00 May Be
City & State		Oity & State		Trust Fund Contribution	Added to Fees
<u> </u>		28	Country	8. This corporation has liability for	intangible tax under s. 199.032,
- Ζφ]	Country	29	30	Floricia Statutes	;
	25 9. Name and Address of Curre			10. Name and Address of New F	Registered Agent
	g. Hame and Address		81 Name		
MEN EV	CHEDAL Y		82 Street Ad	dress (P.O. Box Number is Not Acceptal	ble)
	CHERYL A NNIA DR., STE. B		725	dress (P.O. Box Number is Not Acceptal Montana St.	
	0 FL 32803		83		
UNLANU	U LF 35003		84 City		85 Zip Code
			1 1 1		FL
	The sections of Sections 607 050	2 and 607 1508. Florida Statu	ites, the above named corp	oration submits this statement for the pu eard of directors. Thereby accept the app	urpose of changing its registered office
	agent, or both, in the State of Fall and accept the obligations of, Sell and Expense of Sell and Expenses of Sell	en prostate fapper date (f	Note: Reposeed Apost squature res	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
2.		NO DIRECTORS Fildelete	1 1 TULE		Change Addition
ITLE	D DIFFER		1.2 NAME		
AME	SHIVELY, RUTH E		1.3 STREET ADDRESS		
TREET ADDRESS	3 HORSEMAN COVE		1.4 CHY - ST - ZIP	<u></u>	
1					
	LONGWOOD FL 32750	L.) DETELE	2 1 7111.5		Change Addition
TITLE	D	[] DELETE	2 1 TITLE 2 2 NAME		Change [] Abono
TITLE NAME	D Werley, Cheryl A	C) DELETE			Change Addraon
TITLE NAME STREET ADDRESS	D WERLEY, CHERYL A 465 WERLEY TRAIL	C) DELETE	2.2 NAME		
ITLE NAME STREET ADDRESS DITY -ST- ZIP	D Werley, Cheryl A	☐ DELETE	2.2 NAME 2.3 STREET ADORESS		Change Additio
ITLE IAME STREET ADDRESS DITY - ST - Z!P IITLE	D WERLEY, CHERYL A 465 WERLEY TRAIL		2.2 NAME 2.3 SYHEET ADDRESS 2.4 CHY - ST - ZIP		
ITLE IAME ITHEET ADDRESS DITY - ST - ZIP ITTLE VAME	D WERLEY, CHERYL A 465 WERLEY TRAIL		2.2 NAME 2.3 SMEET ADOPESS 2.4 GHY-ST-ZIP 3.1 HILE		
ITLE IAME STHEET ADDRESS DITY - ST - ZIP UTLE NAME STREET ADDRESS	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DELETE	2.2 NAME 2.3 SMEET ADOPESS 2.4 GHY-ST-ZIP 3.1 TILLE 3.2 NAME		☐ Change ☐ Additio
ITLE HAME STHEET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WERLEY, CHERYL A 465 WERLEY TRAIL		2 2 NAME 2 3 SMEET ADDRESS 2 4 CHY-ST-ZIP 3 1 THLE 3 2 NAME 3 3 STREET ADDRESS		
TITLE NAME STHEET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DELETE	2 2 NAME 2 3 SMEET ADDRESS 2 4 CHY-ST-ZIP 3 1 THLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY ST-ZIP		☐ Change ☐ Additio
ITLE IAME STHEET ADDRESS DITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DELETE	2 2 NAME 2 3 SYNEET ADDRESS 2 4 CHY-ST-ZIP 3 1 THE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY ST-ZIP 4 1 THE		☐ Change ☐ Additio
ITLE LAME LAME STREET ADDRESS CITY - ST - ZIP LITLE STREET ADDRESS CITY - ST - ZIP LITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DETELE	2 2 NAME 2 3 SYREET ADDRESS 2 4 CHY-ST-ZIP 3 1 THE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-ST-ZIP 4 1 THE 42 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP		☐ Change ☐ Additio
ITLE LAME STREET ADDRESS OTY - ST - Z!P LITLE VAME STREET ADDRESS CITY - ST - Z!P LITLE NAME STREET ADDRESS CITY - ST - Z!P CITY - ST - Z!P	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DELETE	2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST- ZIP 3 1 HILE 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		☐ Change ☐ Additio☐ Change ☐ Additio☐ Change ☐ Additio
ITLE IAME IAME STREET ADDRESS OUTY - ST - ZIP ITLE NAME STREET ADDRESS CITY - ST - ZIP ITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE TITLE TITLE TITLE	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DETELE	2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-ST-ZIP 3 1 HILE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY ST-ZIP 4 1 THLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP 5 1 THU 5 2 NAME		☐ Change ☐ Additio
ITTLE NAME STHEET ADDRESS C-TY-ST-2!P TITLE NAME STREET ADDRESS	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DETELE	2 2 NAME 2 3 STREET ADDRESS 2 4 GITY-ST-ZIP 3 1 HILE 3 2 NAME 3 3 STREET ADDRESS 3 4 GITY 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		☐ Change ☐ Additio
TITLE NAME STHEET ADDRESS CITY - ST- ZIP TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME NAME NAME NAME NAME	D WERLEY, CHERYL A 465 WERLEY TRAIL	DETELE	2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-ST-ZIP 3 1 HILE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY ST-ZIP 4 1 THLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP 5 1 THLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CHY-ST-ZIP		☐ Change ☐ Additio
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 TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	D WERLEY, CHERYL A 465 WERLEY TRAIL	☐ DETELE	2 2 NAME 2 3 STREET ADDRESS 2 4 GHY-ST-ZIP 3 1 HILE 3 2 NAME 3 3 STREET ADDRESS 3 4 GHY ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CHY-ST-ZIP 6 1 TITLE		Change Additio
TITLE NAME STHEET ADDRESS C-TY - ST- Z-P TITLE NAME STREET ADDRESS C-TY - ST- Z-P TITLE	D WERLEY, CHERYL A 465 WERLEY TRAIL	DETELE	2 2 NAME 2 3 STREET ADDRESS 2 4 GHY-ST-ZIP 3 1 HILE 3 2 NAME 3 3 STREET ADDRESS 3 4 GHY ST-ZIP 4 1 THE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP 5 1 THU 5 2 NAME 5 3 STREET ADDRESS 5 4 GHY-ST-ZIP 6 1 THE 6 2 NAME		Change Additio
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	D WERLEY, CHERYL A 465 WERLEY TRAIL ORANGE CITY FL 32774	DELETE	2 2 NAME 2 3 STREET ADDRESS 2 4 CHY-ST-ZIP 3 1 HILE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-ST-ZIP 4 1 THLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-ST-ZIP 5 1 THLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CHY-ST-ZIP 6 1 THLE 6 2 NAME 6 3 STREET ADDRESS	alify for the exemption stated in Section 1 ocurate and that my signature shall have	Change Additio

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 in the receiver or truster en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or director of the corporation or the receiver or truster en powered 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: CHERYL A. WERLEY

SIGNATURE: CHERYL A. WERLEY

Florida Statutes; and that my name oath that my signature shall have the same legal effect as in this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or director to the corporation of the receiver or truster en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or director of the corporation or the receiver or truster en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or director of the corporation or the receiver or truster en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or director of the corporation of the receiver of the co