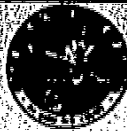


**CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 MAY 25 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000081283 (1)

1. Corporation Name

COMMUNICATIONS NETWORK OF SOUTHWEST FLORIDA, INC

Principal Place of Business

121 CORPORATION WAY, SUITE F/B
VENICE FL 34292

Mailing Address

121 CORPORATION WAY, SUITE F/B
VENICE FL 34292

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/03/1994

3a. Date of Last Report

2. Principal Place of Business

21 724 Myrtle Ave

2a. Mailing Address

26 1532 US 41 Bypass S.

4. FEI Number

65-0541642

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Venice, FL

27 City & State

28 Venice, FL

Zip

24 34293

Country

25 USA

Zip

29 34293

Country

30 USA

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

9. Name and Address of Current Registered Agent

MILLER, JOE W
121 CORPORATION WAY, SUITE F/B
VENICE FL 34292

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MILLER, JOE W
STREET ADDRESS 121 CORPORATION WAY, SUITE F/B
CITY- ST- ZIP VENICE FL 34292

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE D President ☒ Change ☐ Addition
12 NAME Kathy J. Miller
13 STREET ADDRESS 121 Corporation Way Suite F
14 CITY- ST- ZIP Venice FL 34292

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

2 1 TITLE D VP ☒ Change ☐ Addition
22 NAME Joseph W. Miller
23 STREET ADDRESS 121 Corporation Way Suite F
24 CITY- ST- ZIP Venice FL 34292

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3 1 TITLE D Sec ☒ Change ☐ Addition
32 NAME David E. Kreucher
33 STREET ADDRESS 121 Corporation Way, Suite F
34 CITY- ST- ZIP Venice, FL 34292

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4 1 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5 1 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6 1 TITLE ☐ Change ☐ Addition
62 NAME JP 6/29
63 STREET ADDRESS
64 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 110.07(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: Kathy J. Miller / Kathy J. Miller 5/1/95 813-484-4263