


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90077 010 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000015876			
1. Corporation Name C.C.W. TELEPHONE, INC.			
Principal Place of Business 1477 CRAIG COURT PORT ORANGE FL 32119		Mailing Address 1477 CRAIG COURT PORT ORANGE FL 32119	
2. Principal Place of Business 21 6029 SANCTUARY GARDEN BLVD		2a. Mailing Address 26 6029 SANCTUARY GARDEN BLVD	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23 PORT ORANGE, FL 32129		City & State 28 PORT ORANGE, FL 32129	
Zip 24		Zip 29	
Country 25		Country 30	
9. Name and Address of Current Registered Agent DUDLEY, JOSEPH P 403 DOWNING STREET NEW SMYRNA BEACH FL 32168		10. Name and Address of New Registered Agent 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. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PT	NAME WEHNER, HENRY O III	1.1 TITLE 1.2 NAME	1.3 STREET ADDRESS 6029 SANCTUARY GARDEN BLVD
STREET ADDRESS 1477 CRAIG COURT	CITY-ST-ZIP PORT ORANGE FL	1.4 CITY-ST-ZIP PORT ORANGE FL 32129	
TITLE VS	NAME CULP, SHARRON M	2.1 TITLE 2.2 NAME	2.3 STREET ADDRESS 6029 SANCTUARY GARDEN BLVD
STREET ADDRESS 1477 CRAIG CT	CITY-ST-ZIP PORT ORANGE FL	2.4 CITY-ST-ZIP PORT ORANGE, FL 32129	
TITLE 	NAME 	3.1 TITLE 3.2 NAME	3.3 STREET ADDRESS
STREET ADDRESS 	CITY-ST-ZIP 	3.4 CITY-ST-ZIP 	
TITLE 	NAME 	4.1 TITLE 4.2 NAME	4.3 STREET ADDRESS
STREET ADDRESS 	CITY-ST-ZIP 	4.4 CITY-ST-ZIP 	
TITLE 	NAME 	5.1 TITLE 5.2 NAME	5.3 STREET ADDRESS
STREET ADDRESS 	CITY-ST-ZIP 	5.4 CITY-ST-ZIP 	
TITLE 	NAME 	6.1 TITLE 6.2 NAME	6.3 STREET ADDRESS
STREET ADDRESS 	CITY-ST-ZIP 	6.4 CITY-ST-ZIP 	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/24/1995

4. FEI Number

59-3299690

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

☐ Yes

☐ No

14. I 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, with all other like empowered.

SIGNATURE:

HENRY O. WEHNER III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/1/99 904 788-708