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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-\$1-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000025702 (8)

ICM TELEMARKETING CENTER, INC.

Principal Place of Business Mailing Address 120 UNIVERSITY PARK DR. P. O. BOX 1100 **GOLDENROD FL 32733** DO NOT WRITE IN THIS SPACE WINTER PARK FL 32792 3. Date Incorporated or Qualified 03/30/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3305358 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** VECCIA, DENNIS P 120 UNIVERSITY PARK DR. Street Address (P.O. Box Number is Not Acceptable) SUITE 150 83 WINTER PARK FL 32792 City 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 ported isame of registered agent and to elif applicable (NO1) Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition MORTON, CHARLES NAME 1.2 NAME 4416 EU ST STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 2.1 TITLE VECCIA, DENNIS P NAME 22 NAME 120 UNIVERSITY PARK DR., SUITE 150 STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE TITLE 3 1 TITLE Change Addition

14. I hereby certify that the information supplied with this filling 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 is rue 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 control of the con

3.2 NAME

4.1 TITLE

4.2 NAME

51 DICE

5.2 NAMI

6.1 TITLE

6.2 NAME

DELETE

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3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

44 CITY-SI-ZIP

3.4. CITY-ST-ZIP

CICNATURE TO COMPANY

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Change

Change

Addition

Addition

FILED

Apr 30 1998 8:00am

Secretary of State

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