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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000038729 (6)

CONCOURSE TELECOMMUNICATIONS, INC.

		.C.CONWOIT	IOATIONO	, 1110-								
Principal Place of Business				Mailing Address								ATO ROST IDDI
5770 ROOSEVELT BLVD SUITE 600				5770 ROOSEVELT BLVD SUITE 500								
CLEARWATER FL 34620				CLEARWATER FL 34620-3431								
									3. Date Incorporated or Qualified 05/16/1995		oate of Last I /01/1996	Report
2. Principal Place of Business				2a. Mailing Address					4. FEI Number	, 00,		Applied For
21				26					59-3314230			lot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired Section Secti			
City & State				City & State					6. Election Campaign Financing			···
23				28					Trust Fund Contribution			May Be
Zip Country				Zip Cour			ry	···	8. This corporation has liability for			s. 199.032,
24	4 25 25 9. Name and Address of Curre			29 30				Florida Statutes Yos No 10. Name and Address of New Registered Agent				
DEO	MOND, JO		Cultetit ne	Jistereu Agen		8	1	Name	10. Name and Address of New F	registered	Agent	
	ROOSEV											
SUITE 500							2	Street Addre	ress (P.O. Box Number is Not Acceptable)			
CLEARWATER FL 34620							3					
•							4	City	FL 85 Zip C			Code
11, Pursuant	to the provis	ions of Sections	607.0502 and	i 607.1508, Flo	rida Statuti	es, the abo	Ve-	-named corp	oration submits this statement for the		of changing	its registered
office or r	egistered ag m familiar w	ont, or both in the	ne Slate of 1 pe obligations	origh: Such cha of Section 60	ange was a 7.0505. Flo	authorized l orida Statut	by es.	the corporation	oration submits this statement for the on's board of directors. I hereby acc	ept the ap	pointment as	s registered
SIGNATURE	1		7/7	<u></u>	,					4-2	·	,
	Signature, typed	or printed name of reg			(NOTI		gen	nt signature require	ed when reinstating)	DATE		
TITLE	p/	OFFIC	ERS AND DIF		DELETE	13. 1.1 TOLE			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	RS IN 12
NAME	REDMOND, JOHN C			-			1.2 NAME					Addition
STREET ADDRESS 5558 BROOKLINE DR							REE1 ADDRESS					
CITY-ST-ZIP	ADLANDA PLANAIA						1.4 CITY-ST-ZIP					
TITLE				☐ DELE1E			2.1 TITLE				Change	Addition
NAME							22 NAME		٨	2 (A)		
STREET ADDRESS								ADDRESS				
CITY-ST-ZIP TITLE				DELETE			-51	1 - ZIP			Change	Addition
NAME							E	Ì			C) onerige	□ Vonitión
STREET ADORESS							3 3 STREET ADDRESS					
CITY-ST-ZIP						3.4 CITY	- \$1	1 - 7IP				
TITLE					DELETE	4.1 TITLE		7			Change	Addition
NAME						4. 2 NAM						
STREET ADDRESS						4.3 STRE		·				
CITY-ST-ZIP TITLE					DELETE	4.4 CITY 5.1 TITLE		- 7(P			Change	Addition
NAME						5.1 TILE 5.2 NAME					vnanye	L"1 MODITION
STREET ADDRESS						5.3 STRE		ADDRESS				
CITY-ST-ZIP	··-					5.4 CITY						
TITLE				D 65: 575			IIITE				Change	Addition
NAME						6.2-NAME	E					
STREET ADDRESS						6.3 STRE	ET A	ADDRESS				
14. I do hereb	ou certifu the	t the information	cunnlind with	this filing door	not qualif	6.4 CITY-			in Section 119.07(3)(i), Florida Statut		wandf.d	4 1
intormation I am an of	n indicated flicer or dire n Block 12 c	on this annual rep ctor of the domo	oort or supple toon or the re	emental annual ecciver or trust n attachment v	report is tr ee empow	ue and acc ered to exe	euri Buri	rate and that rate this report	in Section 119.07(3)(j), Florida Statut my signature shall have the same leg as required by Chapter 607, Florida	es. i furine jal effect a Statutes; a	r certify that s if made un and that my	title nder oath; that name