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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000059269 (7)

TREASURE COAST PAYPHONE, INC.

## FILED Apr 03 1998 8:00am Secretary of State



					. Piile 18118 ileie 8118 1811 ie 81
	ce of Business	Mailing Address			Biren inrim train firie ante inni
6581 SE BALTUSROL TERRACE 6581 SE BALTUSROL TERRAC			RACE		
STUART FL 34997		STUART FL 34997		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	13 SI ACL
				08/01/1995	
2. Principal F	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0597502	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23	te	28		Election Campaign Financing     Trust Fund Contribution	<b>\$5.00</b> May Be
Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation owes or has paid the	Added to Fees
24	25	29	30	Personal Property Tax due June 30.	Ves No
	9, Name and Address of Curren	it Registered Agent		10. Name and Address of New Registers	
PIEROE, JOSEPH			81 Name		
	81 SE BALTUSROL TERRACE		82 Street Add	Press (P.O. Box Number is Not Acceptable)	<del></del>
ST	UART FL 34997				
]			83		
			84 City		85 Zip Code
11 Purcuant	to the provisions of Sections 607 050	2 and 607 1609 Florida Ctaluta	a the share reserved	F	<u>L</u>
office or r	registered agent, or both, in the State	of Florida Such change was at	uthorized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
ayeni. ra	im familiar with, and accept the obliga	ations of, Section 607.0505, Flor	rida Statutes.		
SIGNATURE	Signature typed or printed name of registered agni	of and title if applicable (NOTE:	Registered Agent signature requ	ired when rainstating) DATE	
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P DEPOS ARDONAL D	☐ DELETE	1 1 TITLE		Change Addition
NAME	PIERCE, VIRGINIA P		1.2 NAME		
STREET ADDRESS	6581 SE BALTUSROL TERR.		1.3 STREET ADDRESS		· ·
CITY-ST-ZIP	STUART FL 34997	DOLETE	1.4 CITY - ST- ZIP		
TITLE	PIERCE, JOSEPH	☐ DELETE	2.1 TITLE		Change Addition
NAME Street adoress	6581 SE BALTUSROL TERR.		2.2 NAME		
CITY-ST-ZIP	STUART FL 34997		2.3 STREET ADDRESS		
TITLE		DELETÉ	2 4 CITY-ST-ZIP 31 THLF		Change Addition
NAME			32 NAME		Change Kodilloll
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DILLETE	4.1 YOLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY-S1 - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T or eve	5.4 CITY - ST - ZIP		
TITLE		DILETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	partify that the information supplied will	to this filtre stars and a set of	6.4 CHY-S1-ZIP		

4. 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 of 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.

CALATURE And G. F. Tourch E. Province 3/2/06 CLISCY 1140