

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

FILED  
May 21 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000092669 (7)  
1. Corporation Name  
TELEPHONE COMPANY OF CENTRAL FLORIDA, INC.



Principal Place of Business  
3575 W. LAKE MARY BLVD  
STE 107  
LAKE MARY FL 32746  
US

Mailing Address  
3575 W. LAKE MARY BLVD  
STE 107  
LAKE MARY FL 32746  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		12/06/1995	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3353696	
24 Country		29 Country		Applied For	
25		30		Not Applicable	
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 owes or has paid the current year Intangible Personal Property Tax due June 30.				Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRAUSER, MICHAEL  
3575 LAKE MARY BLVD.  
SUITE 107  
LAKE MARY FL 32746

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 date of appointment

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	1.1 TITLE	
NAME	BRAUSER, LEON	1.2 NAME	
STREET ADDRESS	3575 W. LAKE MARY BLVD., STE 107	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	BRAUSER, MICHAEL	2.2 NAME	
STREET ADDRESS	100 W. CYPRESS CREEK RD., SUITE 975	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	RIPPER, ELDER N	3.2 NAME	
STREET ADDRESS	3574 LAKE MARY BLVD., SUITE 107	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL 32746	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	WELCH, ANDREA	4.2 NAME	
STREET ADDRESS	3574 LAKE MARY BLVD, SUITE 107	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL 32746	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE

4-17-98

CR2E034 (10/97)