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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000092669

1. Corporation Name

TELEPHONE COMPANY OF CENTRAL FLORIDA, INC.

Principal Place	of Business	Mailing Address		() (STIEST IN THE STILL	
3575 W. LAKE I	MARY BLVD	3575 W. LAKE MARY BLVD		ļ	
STE 107		STE 107		DO NOT WRITE II	N THIS SPACE
LAKE MARY FL US	32746	LAKE MARY FL 32746 US		3. Date Ir corporated or Qualifed	77173 617162
05		US		12/06/1995	
2 Principa Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
			Mar Blue		Not Applicable
21 3599 W. Lake Mary Blvd. Suite, Apt. #, etc.		26 3599 W. Lake Mary Blvd. Suite, Apt. #, etc.		9. 39-333090	\$8.75 Additional
¬ / `, , , , , , , , , , , , , , , , , ,		27 Suite E		5. Certificate of Status Desired	Fee Recuired
City & State		City & State		6 Floation Compaign Financing	\$5.00 May Be
		28 Lake Mary	E)	6. Election Campaign Financing Trust Fund Contribution	Added to Fees
23 Lake Mary FL Country		Zip Zip	Country	This corporation owes the current	
24 3 a 74		29 32746 30	1	Personal Property Tax.	☐ Yes
4 3a 17	9. Name and Address of Current I		7 0 517	10. Name and Address of New Regis	
81 Namen 1 1 1 0					
REALISER MICHAEL				lichael Brausel	
SEZE LAVE MADY DIMO				cdress (P.O. Box Number is Not Acceptable) W. Lake Mary Block)
SUITE 107 COTYCCT			SS ₇ 83 33 77	W. Lake Mary Blud	<u>'</u>
LAKE MARY FL 32746				te E	
84 Cit				1 1	FL 85 Zip Code 3 2 7 4 /
			Lat	(e Mary	
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 cirectors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed na ne of registered agent and title if applicable (NOT:: Registered Agent signature required when reinstatung) DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	. 1.1 TITLE		Change Addition
NAME	Brauser, Leon		1.2 NAME	1 4.4	
STREET ADDRESS	3575 W. LAKE MARY BLVD., STE	107	1.3 STREET ADDRESS	3599 W. Lake Mary Blud, S	tc. iz
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	Lake mary, FI 3274	P
TITLE	D	☐ DELETE	2.1 TITLE	9,	Change Addition
NAME	BRAUSER, MICHAEL		2.2 NAME		
STREET ADDRE 3S	100 W. CYPRESS CREEK RD., S	UITE 975	2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		2. 4 CITY-ST-ZIP		ļ
TITLE	D	☐ DELETE	3.1 TITLE		Change
NAME	RIPPER, ELDER N		32 NAME		
STREET ADDRESS	3574 LAKE MARY BLVD., SUITE	107		3599 W. Lake mary Blud., 3	te. E.
CITY-ST-ZIP	LAKE MARY FL 32746		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	41 TITLE		
NAME	WELCH, ANDREA		4. 2 NAME		-
	3574 LAKE MARY BLVD, SUITE	107		3599 W. Lake Mary Blud,	(de E
STREET ADDRE 3S	LAKE MARY FL 32746	107		23 It we cake was 2 bloom	J.K., L.
CITY-ST-ZIP	LANE MANT FE 34/40	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE			5.2 NAME		3
NAME			5.3 STREET ADDRESS		
STREET ADDRE 3S			5.4 CITY-ST-ZIP		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		Change Addition
TITLE			6.2 NAME		
NAME			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRE 3S					
CITY-ST-ZIP			64 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 empawered to execute this report as recuired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an affachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR