


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

FILED

Apr 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000093890 (8)

1. Corporation Name

ON-LINE COMMUNICATIONS OF ORLANDO, INC.

Principal Place of Business

2800 MUSCATELLO STREET  
ORLANDO FL 32837

Mailing Address

2800 MUSCATELLO STREET  
ORLANDO FL 32837

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1995

4. FEI Number

59-3336623

Applied For

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

2. Principal Place of Business

21 11811 Whispering Tree Ave

Suite, Apt. #, etc.

22 NA

City & State

23 Orlando FL

Zip

24 32837

Country

25 USA

2a. Mailing Address

26 11811 Whispering Tree Ave

Suite, Apt. #, etc.

27 NA

City & State

28 Orlando FL

Zip

29 32837

Country

30 USA

9. Name and Address of Current Registered Agent

CANATSEY, TAMARA L.  
2800 MUSCATELLO STREET  
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name Tamara L. Canatsey

82 Street Address (P.O. Box Number is Not Acceptable)  
11811 Whispering Tree Ave.

83

84 City Orlando

FL

85 Zip Code 32837

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/Ds ☐ DELETE

NAME CANATSEY, TAMARA L.  
STREET ADDRESS 2800 MUSCATELLO STREET  
CITY-ST-ZIP ORLANDO FL 32837

TITLE VP/T ☐ DELETE

NAME CANATSEY, LAWRENCE J.  
STREET ADDRESS 2800 MUSCATELLO STREET  
CITY-ST-ZIP ORLANDO FL 32837

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/Ds ☒ Change ☐ Addition

1.2 NAME Canatsey, Tamara L.  
1.3 STREET ADDRESS 11811 Whispering Tree Ave  
1.4 CITY-ST-ZIP Orlando, FL 32837

2.1 TITLE VP/T ☒ Change ☐ Addition

2.2 NAME Canatsey, Lawrence J.  
2.3 STREET ADDRESS 11811 Whispering Tree Ave  
2.4 CITY-ST-ZIP Orlando, FL 32837

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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:

*[Signature]* Pres.

4/6/98 407-850-2224

CR2E034 (10/97)