

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 22, 1999 8:00 am  
Secretary of State

02-22-1999 90111 044 \*\*\*158.75

DOCUMENT # P96000014125

1. Corporation Name

MAJOR COMMUNICATIONS CONSULTING, INC.

Principal Place of Business

1142 VILLAGE FOREST PLACE  
WINTER PARK FL 32792

Mailing Address

1142 VILLAGE FOREST PLACE  
WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1996

4. FEI Number

59-3363316

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 6337 N. Terrell Rd.

Suite, Apt. #, etc.

22

City & State

23 Tangerine FL

Zip

24 32777

Country

25 USA

2a. Mailing Address

26 P.O. Box 151543

Suite, Apt. #, etc.

27

City & State

28 Altamonte Springs FL

Zip

29 32715

Country

30 USA

9. Name and Address of Current Registered Agent

JONES, WALTER L  
1142 VILLAGE FOREST PLACE  
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name

Jones, Walter L

82 Street Address (P.O. Box Number is Not Acceptable)

6337 N. Terrell Rd

83

84 City

Tangerine

FL

85 Zip Code

32777

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 PD ☐ DELETE

NAME JONES, WALTER L  
STREET ADDRESS 1142 VILLAGE FOREST PLACE  
CITY-ST-ZIP WINTER PARK FL 32792

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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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 President ☒ Change ☐ Addition

1.2 NAME Jones, Walter L

1.3 STREET ADDRESS 6337 N. Terrell Rd

1.4 CITY-ST-ZIP Tangerine, FL 32777

2.1 TITLE Vice President ☐ Change ☒ Addition

2.2 NAME Brenda Major

2.3 STREET ADDRESS 6337 N. Terrell Rd

2.4 CITY-ST-ZIP Tangerine, FL 32777

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, with all other like empowered.

SIGNATURE: Brenda Major Vice President

1-8-99

352-735-9349

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0087688