## 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 # P96000095240 (3)

TELLO COASTAL COMMUNICATIONS, INC.

Principal Place of Business

Mailing Address

3245 BONNYBROOK DR LAKELAND FL 33811 3245 BONNYBROOK DR LAKELAND FL 33811

## FILED Apr 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

4/13/98 941

								3. Date Incorporated or Qualified			
								11/18/1996			
	2. Principal Place of Business			2a. Mailing Address				4. FEI Number		oplied For	
21	1			26				<b>59-3434231</b> Not A		ot Applicable	
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	
22			27	<del></del>				<b>5.</b> 551.1154.15 57 514.15 57 514.15	Fee R	equired	
City & State	9		<b>}</b> η	City & State				6. Election Campaign Financing \$5.00 May Be			
23			28	<u> </u>				Trust Fund Contribution			
Zip		Country	ı ·				8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	25   29   129					30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
		<del></del>	in Hogistore	ia rigoria	81	81 Name					
SANDERS, RONALD											
3245 BONNYBROOK DR						82 Street Ad		dress (P.O. Box Number is Not Acceptable)			
LAKELAND FL 33811						<del> </del>					
						City		F	<b>85</b> 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 regi										ts 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 Statute's.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE											
12.		OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTOR	1S IN 12	
TITLE	D			DELETE	1.1 TITLE	74	7		Change	Addition	
NAME	SANDE	rs, ronald			1.2 NAME		İ				
STREET ADDRESS		ONNYBROOK DR			1.3 STAEET	ADDRESS				17	
CITY-ST-ZIP	LAKELAND FL 33811				1.4 CITY - 5	1.4 CITY-ST-ZIP				l'i	
TITLE				DELETE	2.1 TITLE		1		Change	Addition	
NAME					2.2 NAME						
STREET ADDRESS					2.3 STREET	ADDRESS	1			}	
CITY-ST-ZIP					2. 4 CITY -	ST-ZIP					
TITLE				DELETE	3.1 TITLE				Change	Addition	
NAME					3.2 NAME						
STREET ADDRESS					3.3 STREET	ADDRESS	ľ			- 1	
CITY-ST-ZIP					3.4. CITY -	ST-ZIP	<u> </u>				
TITLE				DELETE	4.1 TITLE		1		Change	Addition	
NAME					4. 2 NAME						
STREET ADDRESS					4.3 STREET	ADDRESS					
CITY-ST-ZIP					4.4 CITY-5	T-ZiP	<b></b>				
TITLE				☐ DELETE	5.1 TITLE				Change	Addition	
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREET	ADDRESS				1	
CITY-ST-ZIP					5.4 CITY - S	T-ZIP	<u> </u>				
TITLE				DELETE	6.1 ₹(TL€		1		☐ Change	☐ Addition	
NAME					6.2 NAME						
STREET ADDRESS					6.9 STREET	AODRESS					
CITY-ST-ZIP					6.4 CITY-S		]				
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											
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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											