

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

FILED
Jun 24 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 # **P97000039825**
1. Corporation Name

PTL COMMUNICATIONS, INC.

Principal Place of Business

Mailing Address

**719 TORCHWOOD DR.
DELAND, FL 32724**

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

MAY 1, 1997

2. Principal Place of Business	26. Mailing Address	4. FEI Number	☒ Applied For ☐ Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
23. Zip	28. Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☒ No
24. Country	29. Country		

9. Name and Address of Current Registered Agent

**WILLIAM HARTMAN
719 TORCHWOOD DR.
DELAND, FL 32724**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
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 **William A. Hartman**

Signature typed or printed name of registered agent and title of agent (if applicable)

(NOTE: Registered Agent signature required when reinstating)

5-8-98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VICE PRES.	1.1 TITLE	PRES.
NAME	FRANK SLABODNIK	1.2 NAME	WILLIAM HARTMAN
STREET ADDRESS	1180 BRADDOCK RD.	1.3 STREET ADDRESS	719 TORCHWOOD DR.
CITY-ST-ZIP	DELTONA, FL 32725	1.4 CITY-ST-ZIP	DELAND, FL 32724
	☐ DELETE	2.1 TITLE	SEC.
TITLE		2.2 NAME	LARRY HARTMAN
NAME		2.3 STREET ADDRESS	525 GOLDEN ARM RD.
STREET ADDRESS		2.4 CITY-ST-ZIP	DELTONA, FL 32725
CITY-ST-ZIP		3.1 TITLE	
	☐ DELETE	3.2 NAME	
TITLE		3.3 STREET ADDRESS	
NAME		3.4 CITY-ST-ZIP	
STREET ADDRESS		4.1 TITLE	
CITY-ST-ZIP		4.2 NAME	
	☐ DELETE	4.3 STREET ADDRESS	
TITLE		4.4 CITY-ST-ZIP	
NAME		5.1 TITLE	
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
	☐ DELETE	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.

WIKO RE-SUBMITTED 6-17-98

CR2E034 (10/97)