

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

APPROVED  
AND  
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98 JUN 25 AM 10:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P97000081266 (3)**  
1. Corporation Name  
**TELEBANC SERVICES, INC.**



Principal Place of Business Mailing Address

**788 CREEKwater TERRACE SUITE 204 LAKE MARY FL 32746**

**788 CREEKwater TERRACE SUITE 204 LAKE MARY FL 32746**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **853 Canterbury dr.** Suite, Apt. #, etc.

22 City & State **lake Mary, FL** Zip **32746** Country **USA**

2a. Mailing Address

26 **P.O. Box 953326** Suite, Apt. #, etc.

27 City & State **lake Mary, FL** Zip **32796** Country **USA**

3. Date Incorporated or Qualified  
**09/19/1997**

4. FEI Number **593469883** 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

9. Name and Address of Current Registered Agent

**JANEY-BOWEN, SHEILA**  
**788 CREEKwater TERRACE SUITE 204 LAKE MARY FL 32746**

*New address ->*

10. Name and Address of New Registered Agent

81 Name **Sheila Janey**

82 Street Address (P.O. Box Number is Not Acceptable) **853 CANTEBURY DRIVE**

83

84 City **LAKE MARY** FL 85 Zip Code **32746**

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 *Sheila Janey (Bower)* *Sheila Janey* **4/24/98**

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>CEO</b>	<input type="checkbox"/> DELETE
NAME	<b>HOWARD W. TAYLOR</b>	
STREET ADDRESS	<b>5808 ALVERS BLVD STE 204</b>	
CITY-ST-ZIP	<b>ORLANDO, FLORIDA</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>Sheila Janey</b>	
1.3 STREET ADDRESS	<b>President and Secretary</b>	
1.4 CITY-ST-ZIP	<b>853 CANTEBURY DRIVE LAKE MARY, FL 32746</b>	
2.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>HOWARD W. TAYLOR</b>	
2.3 STREET ADDRESS	<b>CEO and Treasurer</b>	
2.4 CITY-ST-ZIP	<b>5808 ALVERS BLVD STE 204 ORLANDO FLORIDA</b>	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>300002575813--4</b>	
4.3 STREET ADDRESS	<b>-06/30/98--0102--014</b>	
4.4 CITY-ST-ZIP	<b>****158.75 ****158.75</b>	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

CR2E034 (10/97)

*Handwritten signatures and dates at the bottom of the page.*