

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
May 29 1996 8:00 am
Secretary of State

DOCUMENT # S20259 (5)

1. Corporation Name

NATIONAL BUSINESS TELEPHONE SERVICES, INC.



Principal Place of Business

**2325 ULMERTON RD
SUITE 27
CLEARWATER FL 34622**

Mailing Address

**2325 ULMERTON RD
SUITE 27
CLEARWATER FL 34622**

3. Date Incorporated or Qualified
12/10/1990

3a. Date of Last Report
06/01/1995

4. FEI Number

59-3043644

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 has liability for intangible tax under s. 193.032
Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**KERMODE, RICHARD E.
2325 ULMERTON RD
SUITE 27
CLEARWATER FL 34622**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 of Special or Principal Agent of registered agent and title (if applicable)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DST	<input type="checkbox"/> DELETE
NAME	KLINGENSMITH, JOYCE	
STREET ADDRESS	8022 COTTONWOODE DR	
CITY - ST - ZIP	LARGO FL	
TITLE	CDP	<input type="checkbox"/> DELETE
NAME	KERMODE, RICHARD E.	
STREET ADDRESS	14020 EGRET LANE	
CITY - ST - ZIP	CLEARWATER, FL 34622	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	KLINGENSMITH, WILLIAM	
STREET ADDRESS	8022 COTTONWOODE DR	
CITY - ST - ZIP	LARGO FL	
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. TITLE	V.P. & Ass't. Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	Paul E. Biava	
3. STREET ADDRESS	1340 Gulf Blvd., Apt. 8B	
4. CITY - ST - ZIP	Clearwater, FL. 34630	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5. TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6. NAME	Ron Laessig	
7. STREET ADDRESS	4313 Auston Way	
8. CITY - ST - ZIP	Palm Harbor, FL. 34685	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
9. TITLE	Chief Executive Officer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
10. NAME	Richard Syrek	
11. STREET ADDRESS	362 Devon Drive	
12. CITY - ST - ZIP	Exton, PA. 19341	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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:

R. Kermode CFO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-22-96 813-571-4500
DATE Registered Agent's Signature Required when Registering

CR2E034 (12/95)