

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE, \$750).

000649

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 OCT 21 PM 1:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S57592 (5)
1. Corporation Name
TOTAL COMMUNICATION SYSTEMS INC.



Principal Place of Business
8421 BAYMEADOWS WAY
STE. 1
JACKSONVILLE FL 32247-7275
US

Mailing Address
8421 BAYMEADOWS WAY
STE. 1
JACKSONVILLE FL 32247-7275
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1991

4. FEI Number

59-3072507

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

PERKINS, BRENDA J
4332-101 PLAZA GATE LANE
JACKSONVILLE FL 32217

10. Name and Address of New Registered Agent

81 Name Kevin W. Dornan, Esq.
82 Street Address (P.O. Box Number is Not Acceptable)
83 8421 Baymeadows Way
84 City Jacksonville FL 85 Zip Code 32256

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 S
NAME PERKINS, BRENDA J.
STREET ADDRESS 4332-101 PLAZA GATE LANE
CITY-ST-ZIP JACKSONVILLE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME Perkins, Brenda J.
1.3 STREET ADDRESS 8421 Baymeadows Way
1.4 CITY-ST-ZIP Jacksonville, FL 32256

2.1 TITLE 400002675004 ☐ Change ☐ Addition
2.2 NAME -10/28/98 -01087-015
2.3 STREET ADDRESS *****550.00 *****550.00
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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.

SIGNATURE: *Brenda J. Perkins* 9/28/98 (904) 733-2300

CR2E034 (5/98)