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 # 1. Corporation Name

S58548

(6)

FLORIDA COMMUNICATION SYSTEMS, INC.

Principal Place of Business	Mailing Address
310 SE 20TH CT CAPE CORAL FL 33990	310 SE 20TH CT CAPE CORAL FL 33990

FILED May 08 1998 8:00am Secretary of State



Principal Place	Principal Place of Business Mailing Address						ı ibbilələ (el aita) yacal aliti albat ibil ahaşı atatı dıbıt alalı alalı alalı alalı səbi					
310 SE 20TH CT 310 SE 20TH CT												
CAPE CORAL FL 33990			CAPE CORAL FL 33990									
								DO NOT WRITE IN TH	IIS SPACE			
								3. Date Incorporated or Qualified				
								06/05/1991				
· ·	lace of Business		2a. Maiting	g Address				4. FEI Number		Applied For		
21		2						65-0266552		Not Applicable		
Suite, Apt.	#, 0 1C.	L	Suite /	Apt. #, etc.				5. Certificate of Status Desired		5 Additional		
22		2								Required		
City & State			City & State					6. Election Campaign Financing \$5.00 May Be				
23		2			1			Trust Fund Contribution		ed to Fees		
Zip	Cour	· -	Zip ⊐		ļ -	ountry		8. This corporation owes or has paid the				
24	25	ress of Current Re			30		<u> </u>	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes	□ No		
		Tess of Current Ne	gistered A	Seur		81	Name		ed Agent			
	(L <mark>or,</mark> John L Sr.					"	IName	,				
310 S.E. 20TH COURT						82	2 Street Address (P.O. Box Number is Not Acceptable)					
CAI	P E C ORAL FL 3399	10										
						83						
						84	City		85 Z	ip Code		
								<u></u>	· L	<u> </u>		
11. Pursuant	to the provisions of So	ections 607.0502 and	1 607.1508	Florida Statut	es, the	above	-named	d corporation submits this statement for the purpos	e of changin	g its registered		
agent. Fa	m fa miliar with, and a	cept the obligations	onda. Sucr s of, Sectio	n 607.0505, FI	orida St	eu by atutes	the corp i.	rporation's board of directors. I hereby accept the	арронничени	as registered		
SIGNATURE												
	Signature, typied or printed no			le (NO)			nt signature	re required when reinstating) DAT		1		
12.		OFFICERS AND DIF	RECTORS	Clouere	13			ADDITIONS/CHANGES TO OFFICERS				
TITLE	PD	. 00		☐ DELETE	•	TITLE			L Chang	ge 🔲 Addition		
NAME	TAYLOR, JOHN					NAME						
STREET ADDRESS	310 SE 20TH CT				1.3	STREET	ADDRESS					
CITY-ST-ZIP	ÇAPE CORAL FI			1	_	CITY-S	F-ZIP					
TITLE				DELETE		TITLE			Chang	ge 🔲 Addition 🧗		
NAME					2.2	NAME						
STREET ADDRESS					2.3	STREET	ADDRESS					
CITY-ST-ZIP				,		CITY-9	T-ZIP					
TITLE				DELETE	3.1	TITLE			L. Chan	ge [] Addition		
NAME					3.2	NAME				-		
STREET ADORESS					3.3	STREET	ADDRESS)		
CITY-ST-ZIP					3.4.	CITY-S	T-ZIP					
TITLE				DELETE	4.1	TITLE			Chang	ge 🔲 Addition		
NAME					4. 2	NAME						
STREET ADDRESS					4.3	STREET	ADDRESS					
CITY-ST-ZIP					4.4	CITY - S	T- ZIP			j		
TITLE				DELETE	5.1	TITLE			Chang	ge Addition		
NAME					5.21	NAME				ŀ		
STREET ADDRESS					5.3	STREET	ADDRESS					
CITY-SY-ZIP						CITY-S		1				
TITLE				DELETE	_	TITLE			Chang	ge Addition		
NAME						NAME			- '			
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP						SINEET DITY-SI						
OUTTOITE					0.4 8	VIII - 9	I LET	I				

14. Thereby 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 employeed 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 or trustee employees a statute of the corporation of the corporati