


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

FILED

Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S72682 (5)					
1. Corporation Name TELECO SERVICES, INCORPORATED					
Principal Place of Business 24 HARRISON AVE PANAMA CITY FL 32401			Mailing Address 24 HARRISON AVE PANAMA CITY FL 32401-2744		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/09/1991	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		3a. Date of Last Report 05/09/1996	
22 City & State		27 City & State		4. FEI Number 59-3111341	
23 Zip		28 Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent WILLIAMS, JACK G 24 HARRISON AVE PANAMA CITY FL 32401			10. Name and Address of New Registered Agent		
			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____					
12. OFFICERS AND DIRECTORS					
TITLE	D FAIRCLOTH, RODNEY		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	24 HARRISON AVE		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	PANAMA CITY FL		1.2 NAME		
CITY- ST- ZIP			1.3 STREET ADDRESS		
			1.4 CITY- ST- ZIP		
TITLE	D FAIRCLOTH, DIANE		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	24 HARRISON AVE		2.2 NAME		
STREET ADDRESS	PANAMA CITY FL		2.3 STREET ADDRESS		
CITY- ST- ZIP			2.4 CITY- ST- ZIP		
			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE			3.2 NAME		
NAME			3.3 STREET ADDRESS		
STREET ADDRESS			3.4 CITY- ST- ZIP		
CITY- ST- ZIP			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
			4.2 NAME		
TITLE			4.3 STREET ADDRESS		
NAME			4.4 CITY- ST- ZIP		
STREET ADDRESS			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY- ST- ZIP			5.2 NAME		
			5.3 STREET ADDRESS		
TITLE			5.4 CITY- ST- ZIP		
NAME			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS			6.2 NAME		
CITY- ST- ZIP			6.3 STREET ADDRESS		
			6.4 CITY- ST- ZIP		
14. I do 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: <i>Rodney Faircloth</i> Rodney Faircloth 4/16/97					
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



CR2E034 (9/96)