

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

FILED
Jul 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S97445 (8)
1. Corporation Name
BAY TELEPHONE, INC.



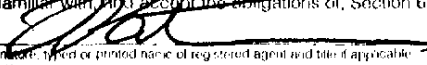
Principal Place of Business 1807 LIENBY AVE SUITE E PANAMA CITY FL 32405 US	Mailing Address P O BOX 854 PANAMA CITY FL 32402 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1107 Beck Avenue Suite, Apt. #, etc 22 City & State 23 Panama City, FL Zip 24 32401 Country 25 USA	2a. Mailing Address 26 Same Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	3. Date Incorporated or Qualified 11/25/1991 4. FEI Number 59-3094859 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
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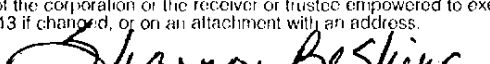
9. Name and Address of Current Registered Agent SLOAN, TIMOTHY J. 427 MCKENZIE AVE PANAMA CITY FL 32401	10. Name and Address of New Registered Agent 81 Name Christopher Patterson 82 Street Address (P.O. Box Number is Not Applicable) 1021 Grace Ave 83 84 City Panama City FL 85 Zip Code 32402
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11. Pursuant to the provisions of Section 607.0502 and 607.1506, 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  DATE July 29, 1998

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE CP NAME COBB, FRANK T. STREET ADDRESS 1227 CLAY AVE CITY-ST-ZIP PANAMA CITY FL	1.1 TITLE President CP 1.2 NAME Rebecca Cobb A. 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP Fountain, FL
TITLE VSTD NAME CARLSON, RICHARD H. STREET ADDRESS 2515 W 11TH ST CITY-ST-ZIP PANAMA CITY FL	2.1 TITLE VSTD 2.2 NAME Sharron Beshirs M. 2.3 STREET ADDRESS 1012 Huntington Rd 2.4 CITY-ST-ZIP Panama City FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS 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  Sharron Beshirs 850

CR2E034 (10/97)