

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V04047 (9)**

1. Corporation Name: **HYPERION TELECOMMUNICATIONS OF FLORIDA, INC.**



Principal Place of Business: **2129 CONGRESS AVENUE RIVIERA BEACH FL 33404**
Mailing Address: **5 WEST THIRD ST COUDERSPORT PA 16915 US**

3. Date Incorporated or Qualified: **01/03/1992**
3a. Date of Last Report: **02/15/1995**
4. FEI Number: **65-0316615**
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. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30
State, Apt. #, etc.:
City & State:
Zip: Country:
City & State:
Zip: Country:

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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 607.0132 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 607.0405, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RIGAS, JOHN	
STREET ADDRESS	5 WEST THIRD ST	
CITY, ST, ZIP	COUDERSPORT PA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	RIGAS, JAMES	
STREET ADDRESS	5 WEST THIRD ST	
CITY, ST, ZIP	COUDERSPORT PA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	RIGAS, MICHAEL	
STREET ADDRESS	5 WEST THIRD ST	
CITY, ST, ZIP	COUDERSPORT PA	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	RIGAS, TIMOTHY	
STREET ADDRESS	5 WEST THIRD ST	
CITY, ST, ZIP	COUDERSPORT PA	
TITLE	VDS	<input type="checkbox"/> DELETE
NAME	MILLIARD, DANIEL	
STREET ADDRESS	5 WEST THIRD ST	
CITY, ST, ZIP	COUDERSPORT PA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	FAJERSKI, PAUL	
STREET ADDRESS	2570 BOYCE PLAZA ROAD	
CITY, ST, ZIP	PITTSBURGH PA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	RIGAS, JOHN	
13. STREET ADDRESS	5 WEST THIRD STREET	
14. CITY, ST, ZIP	COUDERSPORT PA 16915	
2. TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22. NAME	DRENNING, CHARLES	
23. STREET ADDRESS	2570 BOYCE PLAZA ROAD	
24. CITY, ST, ZIP	PITTSBURGH PA 16241	
3. TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32. NAME	FOWLER, RANDOLPH	
33. STREET ADDRESS	2570 BOYCE PLAZA ROAD	
34. CITY, ST, ZIP	PITTSBURGH PA 15241	
4. TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42. NAME	FISHER, RANDALL	
43. STREET ADDRESS	5 WEST THIRD STREET	
44. CITY, ST, ZIP	COUDERSPORT PA 16915	
5. TITLE	PDS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME	MILLIARD, DANIEL	
53. STREET ADDRESS	5 WEST THIRD STREET	
54. CITY, ST, ZIP	COUDERSPORT, PA 16915	
6. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME		
63. STREET ADDRESS		
64. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information included 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 or person 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 both, in agreement with an address.

SIGNATURE: *Randall D. Fisher* RANDALL D. FISHER 2/29/96 (814) 274- 9830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)