

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 14 AM 8:37

DOCUMENT # V58781 (8)

1. Corporation Name

VOICE AND DATA CABLING, INC.

Principal Place of Business

Mailing Address

PO BOX 69
OSPREY FL 34229
US

PO BOX 69
OSPREY FL 34229

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
08/20/1992

3a. Date of Last Report
08/12/1994

2. Principal Place of Business

2a. Mailing Address

21 3314 Lexington St

26 3314 Lexington St

22 State, Apt. #, etc.

27 State, Apt. #, etc.

City & State

City & State

23 Sarasota FL

28 Sarasota FL

24 Zip Country

29 Zip Country

34231

25 Sarasota

34231

30 Sarasota

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UTTERBACK, MICHAEL K
1863 MOVA STREET
SARASOTA FL 34229

81 Name James N. Suarez

82 Street Address (P.O. Box Number is Not Acceptable)
3314 Lexington St

83

84 City Sarasota

FL

85 Zip Code 34231

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 officer 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 James N. Suarez James N. Suarez President 3/8/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	FEENEY, MICHAEL S
STREET ADDRESS	2577 GLEBE FARM CLOSE
CITY-ST-ZIP	SARASOTA FL
TITLE	D
NAME	UTTERBACK, MICHAEL K
STREET ADDRESS	1863 MOVA STREET
CITY-ST-ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11 TITLE	D	☒ Change ☐ Addition
12 NAME	James N. Suarez	
13 STREET ADDRESS	3314 Lexington St	
14 CITY-ST-ZIP	Sarasota FL 34231	
21 TITLE		☒ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(3)(k), 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. 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 1, 2, or Block 6, 13, if changed, or on an attachment with an address.

SIGNATURE: James N. Suarez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/95