

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000005340

Entity Name: VOALTE, INC.

**FILED**  
**Apr 30, 2016**  
**Secretary of State**  
**CC0284377375**

**Current Principal Place of Business:**

5101 FRUITVILLE ROAD  
SUITE 101  
SARASOTA, FL 34232

**Current Mailing Address:**

5101 FRUITVILLE ROAD  
SUITE 101  
SARASOTA, FL 34232 US

**FEI Number: 26-3735176**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BEHRENFELD, CRAIG E  
601 BAYSHORE BLVD., SUITE 700  
TAMPA, FL 33606 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, CEO, DIRECTOR  
Name            LAUDERDALE, WILLIAM L. III  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

Title            SECRETARY  
Name            CALLEJAS, OSCAR JR.  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

Title            CHAIRMAN, DIRECTOR  
Name            JOHNSON, THOMAS S  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

Title            DIRECTOR  
Name            GISH, WILLIAM D.  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

Title            DIRECTOR  
Name            MARVIN, MICHAEL D.  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

Title            DIRECTOR  
Name            HARRIS, ISOBEL D.  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

Title            DIRECTOR  
Name            LOZON, JEFF D.  
Address        5101 FRUITVILLE ROAD  
                  SUITE 101  
City-State-Zip: SARASOTA FL 34232

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: WILLIAM L. LAUDERDALE, III**

**PRESIDENT**

**04/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date