

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

FILED
Feb 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # F96000003408 (9) 1. Corporation Name NORLIGHT TELECOMMUNICATIONS, INC.		

Principal Place of Business 275 NORTH CORPORATE DRIVE BROOKFIELD WI 53045	Mailing Address 275 NORTH CORPORATE DRIVE BROOKFIELD WI 53045
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country 28		3. Date Incorporated or Qualified 07/03/1996	
4. FEI Number 39-1712867		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		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				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	
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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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	KAHLOR, ROBERT A			1.2 NAME			
STREET ADDRESS	333 WEST STATE STREET			1.3 STREET ADDRESS			
CITY-ST-ZIP	MILWAUKEE WI 53203			1.4 CITY-ST-ZIP			
TITLE	VCD	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	SMITH, STEVEN J			2.2 NAME			
STREET ADDRESS	333 WEST STATE STREET			2.3 STREET ADDRESS			
CITY-ST-ZIP	MILWAUKEE WI 53203			2.4 CITY-ST-ZIP			
TITLE	PD	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	DITTER, JAMES J			3.2 NAME			
STREET ADDRESS	275 NORTH CORPORATE DRIVE			3.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKFIELD WI 53045			3.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	ROGERS, ROBERT E			4.2 NAME			
STREET ADDRESS	275 NORTH CORPORATE DRIE			4.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKFIELD WI 53045			4.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME	ULICKI, MICHAEL S			5.2 NAME			
STREET ADDRESS	275 NORTH CORPORATE DRIVE			5.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKFIELD WI 53045			5.4 CITY-ST-ZIP			
TITLE	AS	☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME	KRITZER, PAUL E			6.2 NAME			
STREET ADDRESS	333 WEST STATE STREET			6.3 STREET ADDRESS			
CITY-ST-ZIP	MILWAUKEE WI 53203			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: *James J. Ditter* James J. Ditter, President 2/16/98 (111) 722-2700

CR2E034 (10/97)