

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000006072

**Entity Name:** BELL PARTNERS INC.

**Current Principal Place of Business:**

300 NORTH GREENE STREET  
GREENSBORO, NC 27401

**Current Mailing Address:**

300 NORTH GREENE STREET  
GREENSBORO, NC 27401 US

**FEI Number:** 56-1148631

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           TREASURER, CIO, DIRECTOR  
Name            BELL, JONATHAN D.  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

Title            VP, CFO  
Name            TOMLINSON, JOHN E.  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

Title            VP  
Name            COPELAND, MARY  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

Title            SECRETARY  
Name            BUNKER, SHERI L.  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

Title            DIRECTOR  
Name            BELL, STEVEN D.  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

Title            DIRECTOR  
Name            BELL, E. DURANT  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

Title            PRESIDENT  
Name            BELL, JONATHAN D.  
Address         300 NORTH GREENE STREET  
City-State-Zip: GREENSBORO NC 27401

*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:** JONATHAN D. BELL

**PRESIDENT**

**04/08/2019**

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

\_\_\_\_\_  
Date