

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000002211 (1)

1. Corporation Name:

DATA COMM SERVICE CORPORATION

Principal Place of Business

ROUTE 63, 1579 STRAITS TURNPIKE
MIDDLEBURY CT 06762-1299

Mailing Address

ROUTE 63, 1579 STRAITS TURNPIKE
MIDDLEBURY CT 06762-1299

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1993

3a. Date of Last Report

06/28/1994

4. FEI Number

06-0866998

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

Suite, Apt. # etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. # etc.

27

City & State

28

Zip

29

Country

30

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 607.0502 and 607.1505, 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 607.1505, Florida Statutes.

SIGNATURE

Signature of the person named in Block 9, if the registered agent is a corporation, the signature of the person named in Block 10, if the registered agent is an individual.

Signature of the person named in Block 9, if the registered agent is a corporation, the signature of the person named in Block 10, if the registered agent is an individual.

12/21

12. OFFICERS AND DIRECTORS

TITLE
NAME
PCD
JOHNSON, CHARLES P
STREET ADDRESS
ROUTE 63, 1579 STRAITS TURNPIKE
CITY, ST, ZIP
MIDDLEBURY CT 06762-1299

TITLE
NAME
VD
LAWRENCE, WILLIAM S
STREET ADDRESS
ROUTE 63, 1579 STRAITS TURNPIKE
CITY, ST, ZIP
MIDDLEBURY CT 06762-1299

TITLE
NAME
T
NESLER, DENNIS
STREET ADDRESS
ROUTE 63, 1579 STRAITS TURNPIKE
CITY, ST, ZIP
MIDDLEBURY CT 06762-1299

TITLE
NAME
SD
MODLIN, HOWARD S
STREET ADDRESS
445 PARK AVENUE - 15TH FLOOR
CITY, ST, ZIP
NEW YORK NY 10022

TITLE
NAME
CONT
HENRY, WILLIAM
STREET ADDRESS
ROUTE 63, 1579 STRAITS TURNPIKE
CITY, ST, ZIP
MIDDLEBURY CT 06762-1299

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is substantially true and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information submitted 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 officer or director 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95