

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2004 8:00 am
Secretary of State

05-11-2004 90076 035 ***550.00

DOCUMENT # F93000003743

1. Entity Name
ANTEC CORPORATION OF ILLINOIS



Principal Place of Business
**11450 TECHNOLOGY CIRCLE
DULUTH, GA 30097**

Mailing Address
**11450 TECHNOLOGY CIRCLE
DULUTH, GA 30097**

24074365



2. Principal Place of Business
3871 Lakefield Drive
Suite, Apt. #, etc.

3. Mailing Address
3871 Lakefield Drive
Suite, Apt. #, etc.

05032004 Chg-P CR2E034 (10/03)

City & State
Suwanee, GA

City & State
Suwanee, GA

4. FEI Number
36-3892082

Applied For
Not Applicable

Zip Country
30024 USA

Zip Country
30024 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	STANZIONE, ROBERT J	
STREET ADDRESS	11450 TECHNOLOGY CIRCLE	
CITY-ST-ZIP	DULUTH, GA 30097	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	DURANT, MICHAEL	
STREET ADDRESS	11450 TECHNOLOGY CIRCLE	
CITY-ST-ZIP	DULUTH, GA 30097	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	MARGOLIS, LAWRENCE	
STREET ADDRESS	11450 TECHNOLOGY CIRCLE	
CITY-ST-ZIP	DULUTH, GA 30097	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	EGAN, JOHN M	
STREET ADDRESS	11450 TECHNOLOGY CIRCLE	
CITY-ST-ZIP	DULUTH, GA 30097	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FAUST, JAMES L	
STREET ADDRESS	11450 TECHNOLOGY CIRCLE	
CITY-ST-ZIP	DULUTH, GA 30097	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAMMEYER, ROD F	
STREET ADDRESS	11450 TECHNOLOGY CIRCLE	
CITY-ST-ZIP	DULUTH, GA 30097	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	3871 Lakefield Drive
CITY-ST-ZIP	Suwanee, GA 30024
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Treasurer
STREET ADDRESS	Marc Geraci
CITY-ST-ZIP	3871 Lakefield Dr., Suwanee, GA 30024
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	3871 Lakefield Dr.
CITY-ST-ZIP	Suwanee, GA 30024
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Assistant Secretary
STREET ADDRESS	Gregg McPhee
CITY-ST-ZIP	3871 Lakefield Dr.
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gregg McPhee **Gregg McPhee**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/3/2004 **678-473-2000**
Date Daytime Phone #