

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000004819 (9)

1. Corporation Name

IN-FLIGHT PHONE CORPORATION

Principal Place of Business

ONE TOWER LANE, SUITE 2300
OAK BROOK TERRACE IL 60181

Mailing Address

ONE TOWER LANE, SUITE 2300
OAK BROOK TERRACE IL 60181

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/25/1993

3a. Date of Last Report

07/19/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FBI Number

36-3733319

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

24

Zip

Country

29

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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 607.1508, 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 rotating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MARTIS, SANDRA G
STREET ADDRESS ONE TOWER LANE
CITY-ST-ZIP OAK BROOK TERRACE IL 60181

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME Sandra Goeken Martis
1.3 STREET ADDRESS One Tower Lane
1.4 CITY-ST-ZIP Oakbrook Terrace, IL 60181

TITLE STD
NAME FISCHER, RANDALL
STREET ADDRESS ONE TOWER LANE
CITY-ST-ZIP OAK BROOK TERRACE IL 60181

2.1 TITLE PG ☐ Change ☒ Addition
2.2 NAME Phil Bukes
2.3 STREET ADDRESS One Tower Lane
2.4 CITY-ST-ZIP Oakbrook Terrace, IL 60181

TITLE D
NAME OTHMAN, TALAT M
STREET ADDRESS ONE TOWER LANE
CITY-ST-ZIP OAK BROOK TERRACE IL 60181

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Michael Rowny
3.3 STREET ADDRESS 1800 Pennsylvania Ave. N.W.
3.4 CITY-ST-ZIP Washington, D.C. 20006

TITLE D
NAME ROHLFS, MICHAEL B
STREET ADDRESS ONE TOWER LANE
CITY-ST-ZIP OAK BROOK TERRACE IL 60181

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Frank Kozell
4.3 STREET ADDRESS 2400 N. Glenville
4.4 CITY-ST-ZIP Richardson, TX 75082

TITLE D
NAME GOEKEN, JOHN D
STREET ADDRESS ONE TOWER LN.
CITY-ST-ZIP OAK BROOK TERRACE IL

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME Remove John A. Goeken
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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 voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE

708-573-2660

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