FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000004878 (5)**

1. Corporate Name
MOBILE COMMUNICATIONS OF FLORIDA, INC.

Principal Place of Business	Mailing Address
201 ROUTE 17 NORTH RUTHERFORD NJ 07070	201 ROUTE 17 NORTH RUTHERFORD NJ 07070

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
10/28/1993	04/21/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip: 24 County: 25	Zip: 29 County: 30

4. FEI Number: 22-3207254 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET 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 607.1501 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 (type or print name of registered agent) (registered agent signature required for filing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12 TITLE	PC	41 TITLE	Exec. VP + Director	☒ Change ☐ Addition
12 NAME	MCAULEY, BRIAN D	42 NAME		
12 STREET ADDRESS	201 RT 17 NORTH	43 STREET ADDRESS		
12 CITY ST ZIP	RUTHERFORD NJ	44 CITY ST ZIP		
13 TITLE	VS	21 TITLE	Exec. VP + Director	☒ Change ☐ Addition
13 NAME	O'BRIEN, MORGAN E	22 NAME		
13 STREET ADDRESS	201 RT 17 NORTH	23 STREET ADDRESS	800 Connecticut Ave., NW Suite 1001	
13 CITY ST ZIP	RUTHERFORD NJ	24 CITY ST ZIP	Washington, DC 20006	
14 TITLE	V	31 TITLE	Sr. VP + Ass't Sec.	☒ Change ☐ Addition
14 NAME	MARKELL, JACK A	32 NAME		
14 STREET ADDRESS	201 RT 17 NORTH	33 STREET ADDRESS		
14 CITY ST ZIP	RUTHERFORD NJ	34 CITY ST ZIP		
11 TITLE	T	41 TITLE	Treas. + Sec.	☒ Change ☐ Addition
11 NAME	LONG, ELIZABETH G	42 NAME		
11 STREET ADDRESS	201 RT 17 NORTH	43 STREET ADDRESS		
11 CITY ST ZIP	RUTHERFORD NJ	44 CITY ST ZIP		
51 TITLE		51 TITLE	Asst. Treas.	☐ Change ☒ Addition
51 NAME		52 NAME	John A. Vele	
51 STREET ADDRESS		53 STREET ADDRESS	201 Route 17 North	
51 CITY ST ZIP		54 CITY ST ZIP	Rutherford, NJ 07070	
61 TITLE		61 TITLE	Asst Sec.	☐ Change ☒ Addition
61 NAME		62 NAME	Mary Ann Bowen	
61 STREET ADDRESS		63 STREET ADDRESS	201 Route 17 North	
61 CITY ST ZIP		64 CITY ST ZIP	Rutherford, NJ	

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 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 of change(s), or on an attachment with an address.

SIGNATURE: X John A. Vele John A. Vele 4/21/95 (201) 438-1400
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR Date Daytime Phone #

0395067 FP