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FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90156 005 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000001598

1. Corporation Name
COMDISCO NETWORK SERVICES, INC.



Principal Place of Business
**6111 NORTH RIVER ROAD
ROSEMONT IL 60018**

Mailing Address
**6111 NORTH RIVER ROAD
ROSEMONT IL 60018**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

3. Date Incorporated or Qualified

03/30/1994 4/8/96

4. FEI Number

36-3669103

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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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 607.1508, 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	PONTIKES, NICHOLAS K	
STREET ADDRESS	6111 NORTH RIVER ROAD	
CITY-ST-ZIP	ROSEMONT IL	
TITLE	EVPC	<input checked="" type="checkbox"/> DELETE
NAME	FORD, JERRY L.	
STREET ADDRESS	6111 NORTH RIVER ROAD	
CITY-ST-ZIP	ROSEMONT IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	VOSICKY, JOHN J	
STREET ADDRESS	6111 NORTH RIVER ROAD	
CITY-ST-ZIP	ROSEMONT IL	
TITLE	AVP	<input type="checkbox"/> DELETE
NAME	FELISH, MICHAEL D	
STREET ADDRESS	6111 NORTH RIVER ROAD	
CITY-ST-ZIP	ROSEMONT IL 60018	
TITLE	VPCF	<input type="checkbox"/> DELETE
NAME	STACHULSKI, MARK	
STREET ADDRESS	6111 NORTH RIVER ROAD	
CITY-ST-ZIP	ROSEMONT IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HEWES, PHILIP A	
STREET ADDRESS	6111 NORTH RIVER ROAD	
CITY-ST-ZIP	ROSEMONT IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P/CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Jeremiah M. Fitzgerald	
2.3 STREET ADDRESS	6111 N. River Rd.	
2.4 CITY-ST-ZIP	Rosemont, IL 60018	
3.1 TITLE	VP/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE:

Michael D. Felish
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Asst. VP

Date

847-698-3000

Daytime Phone #

CR2E034 (11/98)

0528019

389680-90156-5

#F94000001598

Comdisco Network Services, Inc.
LIST OF OFFICERS & DIRECTORS
1999

STATEMENT #____
36-3669103

ADDRESS FOR ALL

OFFICERS & DIRECTORS:

6111 N. River Road
Rosemont, IL 60018

ALL TERMS EXPIRE :

December 8, 1999

DIRECTORS:

Nicholas K. Pontikes
John J. Vosicky
Philip A. Hewes

OFFICERS:

Nicholas K. Pontikes
Mark Stachulski
John J. Vosicky
Michael D. Felish
Jeremiah M. Fitzgerald
Shawna F. Charney

OFFICE:

President
Vice President
Vice President & Treasurer
Assistant Vice President - Tax
Secretary
Assistant Secretary