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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F95000001098 (1)**

1. Corporation Name

INTELLICOM SOLUTIONS, INC.

Principal Place of Business

**411 EAGLEVIEW BLVD.
EXTON PA 19341**

Mailing Address

**411 EAGLEVIEW BLVD.
EXTON PA 19341**



3. Date Incorporated or Qualified

03/08/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC.
FIRST FLORIDA BANK BLDG., #420
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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DC

☐ DELETE

NAME

SANFORD, RICHARD D

STREET ADDRESS

411 EAGLEVIEW BLVD.

CITY-ST-ZIP

EXTON PA 19341

TITLE

D

☐ DELETE

NAME

ABELSON, BARRY M

STREET ADDRESS

3000 TWO LOGAN SQ., 18TH & ARCH STS.

CITY-ST-ZIP

PHILADELPHIA PA 19103

TITLE

D

☐ DELETE

NAME

MILLER, WILLIAM R

STREET ADDRESS

1901 MARKET ST.

CITY-ST-ZIP

PHILADELPHIA PA 19103

TITLE

P

☐ DELETE

NAME

PRATT, GREGORY A

STREET ADDRESS

411 EAGLEVIEW BLVD.

CITY-ST-ZIP

EXTON PA 19341

TITLE

VS

☒ DELETE

NAME

KAWALICK, EDWARD A

STREET ADDRESS

411 EAGLEVIEW BLVD.

CITY-ST-ZIP

EXTON PA 19341

TITLE

S

☐ DELETE

NAME

KAWALICK, STEVEN M

STREET ADDRESS

411 EAGLEVIEW BLVD.

CITY-ST-ZIP

EXTON PA 19341

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)(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:

Patrice Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrice Johnson

Date

610-458-5500

Daytime Phone #

CR2E034 (12/95)