

FILE NO. FILING FEE AFTER MAY 1ST IS \$550.00

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Feb 17, 1999 8:00am  
Secretary of State

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DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION  
ANNUAL REPORT  
1999

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

DOCUMENT # F97000005724

1. Corporation Name  
ACS TELECOMMUNICATION SYSTEMS, INC.

Principal Place of Business  
65 WEST STREET ROAD A100  
WARMINSTER PA 18974

Mailing Address  
65 WEST STREET ROAD A100  
WARMINSTER PA 18974

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified  
10/30/1997

4. FEI Number  
23-2923398

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  
CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	SONNENBERG, ALAN	1.2 NAME	
STREET ADDRESS	65 WEST STREET ROAD A100	1.3 STREET ADDRESS	
CITY-ST-ZIP	WARMINSTER PA 18974	1.4 CITY-ST-ZIP	
TITLE	DCOO	2.1 TITLE	
NAME	JONES, RONALD	2.2 NAME	
STREET ADDRESS	65 WEST STREET ROAD A100	2.3 STREET ADDRESS	
CITY-ST-ZIP	WARMINSTER PA 18974	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	
NAME	SONNENBERG, ERIKA	3.2 NAME	
STREET ADDRESS	65 WEST STREET ROAD A100	3.3 STREET ADDRESS	
CITY-ST-ZIP	WARMINSTER PA 18974	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	RIDDLES, CAMERON	4.2 NAME	
STREET ADDRESS	65 WEST STREET ROAD A100	4.3 STREET ADDRESS	
CITY-ST-ZIP	WARMINSTER PA 18974	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Erika Sonnenberg* 1/28/99 215-956-1690  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
ERIK A SONNENBERG SECRETARY

CR2E034 (11/98)