

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 14 1996 8:00 am
Secretary of State

DOCUMENT # L31426 (4)

1. Corporation Name

SENERCOMM, INC.

Principal Place of Business

Mailing Address

3930 RCA BOULEVARD
STE 3004
PALM BEACH GARDENS FL 33410
US

3930 RCA BOULEVARD
SUITE 3004
PALM BEACH GARDENS FL 33410
US

3. Date Incorporated or Qualified
11/20/1989

3a. Date of Last Report
06/16/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
65-0162025

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

FLETCHER, JOHN S.
SUITE 5300
200 SOUTH BISCAYNE BLVD
MIAMI FL 33131-2339

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME KEATING, MARK K.
STREET ADDRESS ~~501B 53RD STREET~~ 424 Northlake Ct. D.
CITY-ST-ZIP WEST PALM BEACH FL North Palm Bch, FL

☐ DELETE

TITLE D
NAME GRENELL, D P
STREET ADDRESS 3930 RCA BLVD STE 3004
CITY-ST-ZIP PALM BEACH GARDENS FL

☐ DELETE

TITLE VPS
NAME GOMEZ, LAWRENCE J.
STREET ADDRESS 104 RAINBOW FISH CIRCLE
CITY-ST-ZIP JUNTER FL Juniper, FL

☐ DELETE

TITLE DC
NAME NOOJIN, TOM
STREET ADDRESS 200 WEST COURT SQUAR, SUITE 100
CITY-ST-ZIP HUNTSVILLE AL

☐ DELETE

TITLE D
NAME LANIER, MONRO
STREET ADDRESS 200 WEST COURT SQUARE, SUITE 100
CITY-ST-ZIP HUNTSVILLE AL

☐ DELETE

TITLE D
NAME BISE, JOHN
STREET ADDRESS 200 WEST COURT SQUARE, SUITE 100
CITY-ST-ZIP HUNTSVILLE AL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Richard Green
1.3 STREET ADDRESS 8551 SW 140TH TERR
1.4 CITY-ST-ZIP MIAMI, FL

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)