FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

(3)

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01324

1324

GENERAL SIGNAL NETWORKS, INC.

FILED
May 04 1998 8:00am
Secretary of State

Principal Place 1 HIGH PARI SAMFORD C	•	Mailing Address 135 MT READ BLVE GENERAL SIGNAL 1 ROCHESTER NY 14 US	TAX DEPT	DO NOT WRITE IN TH	ilati deni didi atan zidi (AA)
6 Dringing I	Place of Business	2a. Mailing Address		03/22/1984 4. FEI Number	
21 Principal r	FIRE OF DUSINESS	26 Mailing Address	1	06-0962862	Applied For Not Applicable
Suite, Apt	# etc	Suite, Apt. #, etc			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	le	City & State		8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curre			10. Name and Address of New Register	ed Agent
% 12	T CORPORATION SYSTEM C T CORPORATION SYSTEM 00 SOUTH PINE ISLAND ROAD ANTATION FL 33324		81 Name82 Street A8384 City	Address (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant office or agent. I s SIGNATURE	to the provisions of Sections 607.0156 registered agent, or both, in the State am familiar with, and accept the oblig Signature typed or proced reach the galacted age	e of Florida. Such change pations of, Section 607.050	Statutes, the above-named was authorized by the corp 05, Florida Statutes. [NOTC Registered Agent signature]	corporation submits this statement for the purposionation's board of directors. I hereby accept the a	appointment as registered
12.	OFFICERS AN	ID DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	☐ DELET	E 1.1 TITLE	Acet Treasure	Change Addition
NAME	COACKLEY, ROBERT		1.2 NAME	James H. Doharty	
STREET ADDRESS	5 KENDLES RUN RD		1.3 STREET ADDRESS	, When Ridge Pok.	18
CITY-ST-ZIP	MOORESTOWN NJ		1.4 City-St-ZiP	standard IT OBFOY	6
TITLE	CFOS	☐ DELET	E 21 TITLE 👪	Transe L. Boby	Change (X) Addition
NAME	MORGAN, DONALD W		22 NAME	Zoanne C. Room	1
STREET ADDRESS	574 WILLIS LN		2.3 STREET ADDRESS	1 Horan ender Park	
CITY-ST-ZIP	STRAFFORD PA		2.4 CITY - ST - ZIP	stambors, cl	
TITLE	THOMAS, E TAYLOR	BELET	Ë 3.1 TITLE	Jarena D. Martin	Change Addition
NAME	HIGH RIDGE PK		3.2 NAME	1 High Edge Dut	'' }
STREET ADDRESS	STAMFORD CT		3.3 STREET ADDRESS	Conf. T	
CITY-ST-ZIP	AS	Naur	3.4. CITY - ST - ZIP	Stanford Co	D Ohanna D Addition
TITLE	THOMAS, E KINGSLEY	TXO FLET	i i		L Change L Addition
NAME	HIGH RIDGE PK		4. 2 NAME		
STREET ADDRESS	STAMFORD CT		4.3 STREET ADDRESS		
CITY-ST-ZIP	V	DELETI	4.4 CITY-ST-ZIP		Change Addition
TITLE	CONNOLLY, ROBERT J.				Change Addition
NAME	12 FAIRFIELD RD.		5.2 NAME		İ
STREET ADDRESS	OXFORD CT		5.3 STREET ADDRESS		}
CITY-ST-ZIP	SA OND OF		5.4 CITY - ST - ZIP		
TITLE NAME	I V	☐] DELET			Change Addition
1 STREAM	FISARELLI ANTHONY	DELET			Change Addition
	FUSARELLI, ANTHONY 6 CRESENT LANE	☐ DELET	62 NAME		Change Addition
STREET ADDRESS	FUSARELLI, ANTHONY 6 CRESENT LANE TRUMBULL CT	DELET			Change Addition

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 trusted 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: Some S. Dudores

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mac dead