

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

PROFIT
CORPORATION
ANNUAL REPORT



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

1999

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90005 025 ***150.00

DOCUMENT # P03848

1. Corporation Name
AMERICAN BELL INFORMATION, INC.



Principal Place of Business
**412 MT KEMBLE AVE RM S-230
S287
MORRISTOWN NJ 07960
US**

Mailing Address
**412 MT KEMBLE AVE RM S-230
S287
MORRISTOWN NJ 07960
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/26/1984

4. FEI Number

13-3214019

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

9. Name and Address of Current Registered Agent

**C T 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 **P** ☐ DELETE
NAME **MCCLINTOCK, KEITH E**
STREET ADDRESS **295 N. MAPLE AVE.**
CITY-ST-ZIP **BASKING RIDGE NJ 07920**

TITLE **VAS** ☐ DELETE
NAME **DUAH, ANTOINETTE A**
STREET ADDRESS **412 MT KEMBLE AVE.**
CITY-ST-ZIP **MORRISTOWN NJ 07960**

TITLE **VAS** ☐ DELETE
NAME **TUTNAUER, JEFF**
STREET ADDRESS **412 MY KEMBLE AVE.**
CITY-ST-ZIP **MORRISTOWN NJ 07960**

TITLE **VS** ☐ DELETE
NAME **FEIT, ROBERT**
STREET ADDRESS **131 MORRISTOWN RD. ROOM A2035**
CITY-ST-ZIP **BASKING RIDGE NJ 07920**

TITLE **V** ☐ DELETE
NAME **HOKENSON, JOHN H**
STREET ADDRESS **131 MORRISTOWN RD. ROOM A2024**
CITY-ST-ZIP **BASKING RIDGE NJ 07920**

TITLE **V** ☐ DELETE
NAME **MAYNES, ROBERT A**
STREET ADDRESS **131 MORRISTOWN RD. ROOM A2008**
CITY-ST-ZIP **BASKING RIDGE NJ 07920**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME **See Attached List**
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

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

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

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

6.1 TITLE ☐ Change ☐ 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:

Antoinette A. Duah 3/16/99 973644-1224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

AMERICAN BELL INFORMATION, INC.

Election Date 01/14/1999 FEIN 13-3214019

ELECTED CORPORATION OFFICERS AND DIRECTORS**TITLE / NAME****BUSINESS ADDRESS**DOC-PO3848
267092-90005-25**OFFICERS**

President John W. Thomson	295 N. Maple Avenue Basking Ridge, NJ 07920
Vice President & Secretary Robert S. Feit	131 Morristown Rd. Bldg.A Rm.A2035 Basking Ridge, NJ 07920-1002
Vice President/Treasurer/Asst. Secretary Steven Garfinkel	295 N. Maple Avenue Room 1211N3 Basking Ridge, NJ 07920-1002
Assistant Secretary Ephraim M. Brecher	412 Mt. Kemble Avenue, PO Box 1995 Room S267 Morristown, NJ 07962-1995
Assistant Secretary Antoinette A. Duah	412 Mt. Kemble Avenue Room S287 Morristown, NJ 07960
Assistant Secretary Jeff Tutnauer	412 Mt. Kemble Avenue Room C250 Morristown, NJ 07960
Assistant Secretary Gary Wiggins	412 Mt. Kemble Ave. Room S209 Morristown, NJ 07960

DIRECTORS

Director Robert S. Feit	131 Morristown Rd. Bldg.A Rm.A2035 Basking Ridge, NJ 07920-1002
Director Steven Garfinkel	295 N. Maple Avenue Room 1211N3 Basking Ridge, NJ 07920-1002
Director John W. Thomson	295 N. Maple Avenue Basking Ridge, NJ 07920