2001 UNIFORM BUSINESS REPORT (UBR)

May 10, 2001 8:00 am Secretary of State **DOCUMENT # P16957** 1. Entity Name GTE AIRFONE INCORPORATED 05-10-2001 90095 049 ***150.00 Principal Place of Business Mailing Address 2809 BUTTERFIELD ROAD 2809 BUTTERFIELD ROAD OAK BROOK IL 60522-9000 OAK BROOK IL 60521 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-3166957 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FRE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition TITLE **X**Delete TITLE PRESIDENT WILLIAM E. PALLONE NAME HARLESS, KATHERINE NAME 2809 BUTTERFIELD STREET ADDRESS 4 BEL AIRE COURT STREET ADDRESS CITY-ST-ZIP OAK BROOK CITY-ST-ZIP **BURR RIDGE IL** 60522 ASSISTANT SECRETARY Change 💢 Delete TITLE NAME WHITE, HARDY ---NAME RONALD J. KAUSZ FIELD ROAD STREET ADDRESS STREET ADDRESS 2812 HOLLENBACK CT CITY-ST-7IP CITY-ST-ZIP NAPERVILLE IL 60565 SSISTANT TITLE TITLE LAURA BEMBENEK NAME KIMMEL. PAUL L. JR. NAME STREET ADDRESS STREET ADDRESS 2809 BUTTERFIELD ROAD 1102 FOX GLEN DRIVE CITY-ST-ZIP CITY-ST-ZIP ST. CHARLES IL 60174 Delete TITLE (T) Addition NAME GATTO, FRANK P. NAME STREET ADDRESS STREET ADDRESS 2624 WINTER PARK DR CITY-ST-ZIP CITY-ST-ZIP NAPERVILLE IL ☐ Delete TITLE ☐ Change ☐ Addition DROST, MARIANNE NAME STREET ADDRESS 1202 LANSDOWNE CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SOUTHLAKE TX 76092 TREASURER TITLE Delete Change Change TITLE ` Addition LAWRENCE R. WHITMAN NAME O'BRIEN, DANIEL P. NAME STREET ADDRESS 2809 BUTTERFIELD ROAD STREET ADDRESS 7 MORGANTI COURT CITY-ST-ZIP CITY-ST-ZIP DAK BROOK RIDGEFIELD CT 06877 IL 60522

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/01

630-575-1233

Daytime Phone #