


**-2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P16957 1. Entity Name VERIZON AIRFONE INC.	
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Principal Place of Business 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522-9000 US	Mailing Address 2809 BUTTERFIELD ROAD OAK BROOK, IL 60521
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04112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-3166957	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALLONE, WILLIAM E 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KALISZ, RONALD J 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BEMBENEK, LAURA 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DROST, MARIANNE 1095 AVENUE OF THE AMERICAS NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GARRITY, JANET M 3900 WASHINGTON ST. WILMINGTON, DE 19802
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000528435
05/05/06-80040-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald J. Kalisz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD J. KALISZ

4/18/06 630-575-1235

Date

Daytime Phone