

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22878

FILED
Apr 25, 2005
Secretary of State

Entity Name: AG COMMUNICATION SYSTEMS CORPORATION

Current Principal Place of Business:

600-700 MOUNTAIN AVE
ROOM 3C-515
MURRAY HILL, NJ 07974

New Principal Place of Business:

Current Mailing Address:

600-700 MOUNTAIN AVE
ROOM 3C-515
MURRAY HILL, NJ 07974

New Mailing Address:

800 NORTH POINT PKWY
ROOM 83N380F
ALPHARETTA, GA 30005

FEI Number: 36-3615308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KEEFE, MICHAEL C
Address: 600-700 MOUNTAIN AVE
City-St-Zip: MURRAY HILL, NJ 07974

Title: VPS () Delete
Name: ZEELER, HARVEY
Address: 24 MOUNTAIN AVE
City-St-Zip: MENDHAM, NJ 07945

Title: VP () Delete
Name: GEARY, DAVID
Address: 1960 LUCENT LANE
City-St-Zip: NAPERVILLE, IL 60566

Title: VP () Delete
Name: HICKEY, JOHN G
Address: 600-700 MOUNTAIN AVE
City-St-Zip: MURRAY HILL, NJ 07974

Title: VPT () Delete
Name: GIBBENS, MARK G
Address: 600-700 MOUNTAIN AVE
City-St-Zip: MURRAY HILL, NJ 07974

Title: AS () Delete
Name: URBINA, RENE
Address: 800 NORTH POINT PARKWAY
City-St-Zip: ALPHARETTA, GA 30005

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: BATTLE, DORIS
Address: 800 NORTH POINT PKWY
City-St-Zip: ALPHARETTA, GA 30005

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DORIS BATTLE

AS

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date