

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra D. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 11:25

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P32794

(0)

1. Corporation Name

TE/COMMUNICATIONS, INC.

Principal Place of Business

**8500 W. 110TH ST.
SUITE 200
OVERLAND PARK KS 66210**

Mailing Address

**8500 W. 110TH ST.
SUITE 200
OVERLAND PARK KS 66210**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/04/1991

3a. Date of Last Report

03/21/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

06-0872068

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

24

Country

25

Country

29

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
BENJAMIN, GEORGE N. III
8500 W 110 ST
OVERLAND PK KS**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**EVD
CARTER, ERIC V.
8500 W 110 ST
OVERLAND PARK KS**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
WEBB, ROBERT W.
225 W WASHINGTON ST
CHICAGO IL**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
BREES, NEAL L
8500 W 110 ST
OVERLAND PARK KS**

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CD
PRITZKER, ROBERT A
225 W WASHINGTON ST
CHICAGO IL**

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LABLANC, ROBERT E.
323 HIGHLAND AVE.
RIIDGEWOOD CT**

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Neal L. Brees, Treasurer

4-25-95

(213) 344-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TIE COMMUNICATIONS, INC.
ADDITIONAL OFFICERS AND DIRECTORS
ATTACHMENT TO FLORIDA ANNUAL REPORT

7.1 TITLE	V
7.2 NAME	PIECHOCKI, RANDOLPH K.
7.3 STREET ADDRESS	8500 W 110TH ST
7.4 CITY-ST-ZIP	OVERLAND PARK, KS 66210

8.1 TITLE	V
8.2 NAME	WELLHAUSEN, JOHN W.
8.3 STREET ADDRESS	8500 W 110TH ST
8.4 CITY-ST-ZIP	OVERLAND PARK, KS 66210

9.1 TITLE	V
9.2 NAME	KALINA, ROBERT
9.3 STREET ADDRESS	8500 W 110TH ST
9.4 CITY-ST-ZIP	OVERLAND PARK, KS 66210

10.1 TITLE	D
10.2 NAME	GLUTH, ROBERT C.
10.3 STREET ADDRESS	225 WEST WASHINGTON STREET
10.4 CITY-ST-ZIP	CHICAGO, IL 60606