

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000926

Entity Name: GLOTEL, INC.**Current Principal Place of Business:**8700 W. BRYN MAWR AVE., SUITE 400N
CHICAGO, IL 60631**Current Mailing Address:**8700 W. BRYN MAWR AVE., SUITE 400N
CHICAGO, IL 60631 US**FEI Number:** 58-2075551**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	CEO & TREASURER
Name	CASEY, MICHELE
Address	8700 W. BRYN MAWR AVE., SUITE 400N
City-State-Zip:	CHICAGO IL 60631

Title	DIRECTOR
Name	WYNTER, LINDSAY
Address	8700 W. BRYN MAWR AVE., SUITE 400N
City-State-Zip:	CHICAGO IL 60631

Title	DIRECTOR
Name	CHAMBERS, AMANDA
Address	8700 W. BRYN MAWR AVE., SUITE 400N
City-State-Zip:	CHICAGO IL 60631

Title	SECRETARY/VICE PRESIDENT
Name	WALDMAN, THOMAS
Address	6260 LOOKOUT ROAD
City-State-Zip:	BOULDER CO 80301

Title	VICE PRESIDENT/ASST. SECRETARY
Name	EISNER, STEVEN
Address	6260 LOOKOUT ROAD
City-State-Zip:	BOULDER CO 80301

Title	CHAIRMAN OF THE BOARD/DIRECTOR
Name	ABDO, ASHLEY
Address	8700 W. BRYN MAWR AVE., SUITE 400N
City-State-Zip:	CHICAGO IL 60631

I hereby 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 all other like empowered.

SIGNATURE: MICHELE CASEY

CEO

04/13/2017

Electronic Signature of Signing Officer/Director Detail_____
Date