

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005406

Entity Name: AFC CABLE SYSTEMS, INC.

FILED  
Apr 07, 2010  
Secretary of State

**Current Principal Place of Business:**

272 DUCHAINE BLVD.  
NEW BEDFORD, MA 02745

**New Principal Place of Business:**

**Current Mailing Address:**

272 DUCHAINE BLVD.  
NEW BEDFORD, MA 02745

**New Mailing Address:**

FEI Number: 95-1517994

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
FORT LAUDERDALE, FL 33324 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: PD  
Name: OLIVER, GEORGE R  
Address: 272 DUCHAINE BLVD.  
City-St-Zip: NEW BEDFORD, MA 02745

Title: SVPD  
Name: LEMBERG, MARC J  
Address: 272 DUCHAINE BLVD.  
City-St-Zip: NEW BEDFORD, MA 02745

Title: TRES  
Name: NAYAR, ARUN  
Address: 272 DUCHAINE BLVD.  
City-St-Zip: NEW BEDFORD, MA 02745

Title: DVP  
Name: JENKINS, JOHN S JR.  
Address: 272 DUCHAINE BLVD.  
City-St-Zip: NEW BEDFORD, MA 02745

Title: VP  
Name: COUGHLIN, CHRISTOPHER J  
Address: 272 DUCHAINE BLVD.  
City-St-Zip: NEW BEDFORD, MA 02745

Title: VP  
Name: TOMASZEK, WESLEY  
Address: 272 DUCHAINE BLVD.  
City-St-Zip: NEW BEDFORD, MA 02745

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: ANNE MEYER

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

POA

04/07/2010

\_\_\_\_\_ Date