

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000005406

**Entity Name:** AFC CABLE SYSTEMS, INC.

**Current Principal Place of Business:**

272 DUCHAINE BLVD  
NEW BEDFORD, MA 02745

**Current Mailing Address:**

272 DUCHAINE BLVD  
NEW BEDFORD, MA 02745 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
FORT LAUDERDALE, 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 VP  
Name KELLY, DANIEL S  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title ASSISTANT SECRETARY  
Name YOUNG, COURTNEY  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title DIRECTOR  
Name WALTZ, WILLIAM  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title DIRECTOR  
Name JOHNSON, DAVID P.  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title VP  
Name LOWE, ANGEL  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title VP  
Name VERTENTE, MICHAEL  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title VP  
Name JOHNSON, DAVID P.  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title VICE PRESIDENT / TREASURER /  
ASST. SECRETARY  
Name CERON, RAMON  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

**Continues on page 2**

*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: DANIEL S KELLY**

**SECRETARY**

**05/28/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name KELLY, DANIEL S  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title VP  
Name SHERMAN, KEITH  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title VP  
Name HOU, JAMES  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745

Title PRESIDENT  
Name LARIVIERE, PETER  
Address 272 DUCHAINE BLVD  
City-State-Zip: NEW BEDFORD MA 02745