



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3010

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 158803		2. Name of Corporation Coast To Coast Cellular Inc.			
3. Street Address Principal Business Office 1910 Minno Drive Suite 210			City Johnstown	State PA	Zip 15905
4. Business Phone No. 814-255-3048		5. State of Incorporation Pennsylvania			
6. Brief Description of the Character of Business Conducted in Rhode Island Reseller of Cellular Phone Services					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name J. William Riner			Vice President Name Saul Glosser		
Street Address 639 Elm Drive			Street Address 121 Arlington Street		
City Johnstown	State PA	Zip 15905	City Johnstown	State PA	Zip 15905
Secretary Name Phyllis Forman			Treasurer Name None		
Street Address 312 Bliss Street			Street Address		
City Johnstown	State PA	Zip 15905	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name J. William Riner			Director Name Saul Glosser		
Street Address 639 Elm Drive			Street Address 121 Arlington Street		
City Johnstown	State PA	Zip 15905	City Johnstown	State PA	Zip 15905
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 1000	Class Series Common	Par Value \$1.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature

Date

David E. Price

Print or Type Name

Compliance Officer

Title

FILED	
File Date	FEB 17 2009
Check No.	
By:	By 17931
FOR SECRETARY OF STATE USE ONLY	