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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2017 Corporation

- → Filing period: January 1 March 1 → Filing Fee: \$50.00

1. Entity ID Number	2. Exact nam	2. Exact name of the Corporation					
769084		CTI TOWERS, INC.					
Principal Office Address				City		Zip	
1701 JOHN F KENNEDY BLVD, 32ND FLOOR			PHILADEL	PHILADELPHIA		19103-2838	
4. NAICS Code  81  5. State of Incorporation		6. Brief description of the character of business conducted in Rhode Island  COMMUNICATIONS					
PENNSYLVANIA							
7. List ALL officers (names and	d addresses)		T	Che	eck the box to i	ndicate an attachment	
President Name AMY L BANSE	Vice-President Name THOMAS J DONNELLY						
Street Address 1701 JOHN F K	Street Address 1701 JOHN F KENNEDY BLVD, 32ND FLOOR						
City PHILADELPHIA	State PA	<sup>Zip</sup> 19103-2838	City PHILADELPHIA		State PA	Zip 19103-2838	
Secretary Name CARRIE L LARSON			Treasurer Name WILLIAM E DORDELMAN				
Street Address 1701 JOHN F KENNEDY BLVD, 32ND FLOOR			Street Address 1701 JOHN F KENNEDY BLVD, 32ND FLOOR				
City PHILADELPHIA	State PA	<sup>Zip</sup> 19103-2838	City PHILADELPHIA		State PA	Zip 19103-2838	
8. List ALL directors (names ar	nd addresses)			Che	eck the box to i	ndicate an attachment	
Director Name  ANTHONY F PEDUTO			Director Name LOUIS A TOTH				
Street Address 1701 JOHN F KENNEDY BLVD, 32ND FLOOR			Street Address 1701 JOHN F KENNEDY BLVD, 32ND FLOOR				
City PHILADELPHIA	State PA	<sup>Zip</sup> 19103-2838	City PHILADELPHIA		State PA	Zip 19103-2838	
Director Name DAVID ZILBERMAN			Director Name				
Street Address 1701 JOHN F K	ENNEDY BLVD, 32	ND FLOOR	Street Address	3	· <del></del> ·		
City PHILADELPHIA	State PA	<sup>Zip</sup> 19103-2838	City		State	Zip	
9. Shares Authorized		10. Shares Issue		d Check the box to indicate an attachment			
This information is currently of record in the		NUMBER OF SHARES		CLASS/SERIES PAR VALUE			
Department of State. Changes require an additional filing.		0		COMMON		\$0.0010	
		0		PWP		\$0.0010	
<ol> <li>This report must be execute trustee, this report must be exe</li> </ol>	ecuted on behalf of	the corporation by the	e receiver or tr	ustee.			
Under penalty of perjury, I de statements, and that all state	eclare and affirm to	hat I have examined	this report, i	ncluding any acc	ompanying s	chedules and	
Name of Authorized Represent		nereni are due anu	correct.		Date		
THOMAS J DONNELLY, VICE PRESIDENT			FI	FILED 02/07/2017			
Signature of Authorized Repres	sentative Domelly			7 2017			
MAIL TO:	merey ,	D.		(2) (()			

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

