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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2019
Corporation

FILED

\rightarrow	Filing period	January 1	-	March	•
•	3 # 0				

→ F:ling Fee. \$50.00

→ Penalty: Additional \$25 00 fee if form is not filed by April 1.

	MAR 1 5 2019	
BY_	SORL	$\mathcal{O}_{\mathcal{O}}$

* Entity ID Number	2 Exact name	e of the Corporatio	า			LE			
001686657	Hamilton	Hamilton Long Distance Company							
3 Principal Office Address			City		State	Zıp			
1006 12th St	Aurora		NE	68818					
4 NAICS Code	6. Brief descr	iption of the charac	≥ Islano						
517919	VoIP Teleph	VoIP Telephone Service							
5. State of Incorporation									
Nebraska									
7. List ALL officers (names an	d addresses)				ck the box to indic	ate an attachment 🖸			
President Name John Nelson			Vice-Pres de	nt ∖ame Dan Mollic	oni				
Street Address 1006 12th St			Street Addres	^{SS} 1006 12th St					
City Aurora	State NE	^{Zip} 68818	City Aurora		State NE	Zip 68818			
Secretary Name Jannelle Sein	Treasure ^r Name Gary Warren								
Sireel Address 1006 12th St			Street Addre	Street Address 1006 12th St					
City Aurora	State NE	^{Zıp} 68818	C ty Aurora		State NE	Z ₁ p 68818			
8 List ALL directors (names a	and addresses)		1	Che	ck the box to indic	ate an attachment 🗆			
Director Name Phillip C. Nels	Director Nam	Director Name James E. Nelson							
Street Address 1006 12th St			Street Addre	Street Address 1006 12th St					
Cily Aurora	State NE	^{Zip} 58818	City Aurora	l	State NE	Zip 68818			
Director Name Nancy K Nelso	on	1	Director Nam						
Street Address 1006 12th St			Street Address						
City Aurora	State NE	Z p 68818	City		State	Zıp			
9 Shares Author zed		10 Shares Is	sued	Che	ck the pox to haid	ate an attachment			
This information is currently o	frecord in the	NUMBER C	S SHARES	C. ASS/S&	#IES	PAR VALUE			
Department of State.		1,000		CWP	1	.00			
Changes require an additional	filing.								
11 This report must be execu	ited on behalf of the	corporation by an	authorized repri	esentative If the co	rporation s in the	hands of a receiver or			
trustee, this report must be e	xecuted on behalf of	the corporation by	the receiver or	trustee.					
Under penalty of perjury, I on statements, and that all sta				including any acc	ompanying sche	dules and			
Name of Authorized Represe	na correct.		Date						
Gary Warren				03/11/2019					
Signature of Authorized Rear	esentative								

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sosin.gov State of Rhode Island

Department of State – Business Services Division

Entity ID 001686657 Hamilton Long Distance Company

7. Officer Attachment

Phillip C. Nelson, Vice President 1006 12th St Aurora, NE 68818

James E. Nelson, Vice President 1006 12th St Aurora, NE 68818

Nancy K Nelson, Vice President 1006 12th St Aurora, NE 68818

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