

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215520806

1.) CORPORATION NAME:

TDS Communication Solutions, Inc.

DUE DATE: **7/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1594177**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 525 JUNCTION RD

CITY/ST/ZIP: MADISON, WI 53717

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DAVID A WITTWER
TITLE: PRESIDENT
ADDRESS: 525 JUNCTION RD
CITY/ST/ZIP/CO: MADISON, WI 53717

OFFICER

DIRECTOR

NAME: JAME W BUTMAN
TITLE: VICE PRESIDENT
ADDRESS: 525 JUNCTION ROAD
CITY/ST/ZIP/CO: MADISON, WI 53717

OFFICER

DIRECTOR

NAME: MICHAEL A. GASSER
TITLE: VICE PRESIDENT
ADDRESS: 525 JUNCTION ROAD
CITY/ST/ZIP/CO: MADISON, WI 53717

OFFICER

DIRECTOR

NAME: CLIFF L. LAWSON
TITLE: VICE PRESIDENT
ADDRESS: 525 JUNCTION ROAD
CITY/ST/ZIP/CO: MADISON, WI 53717

OFFICER

DIRECTOR

NAME: PETER L SEREDA
TITLE: VICE PRESIDENT
ADDRESS: 525 JUNCTION ROAD
CITY/ST/ZIP/CO: MADISON, WI 53717

OFFICER

DIRECTOR

NAME: DOUGLAS D. SHUMA
TITLE: VICE PRESIDENT
ADDRESS: 525 JUNCTION ROAD
CITY/ST/ZIP/CO: MADISON, WI 53717

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICKI L VILLACREZ VICE PRESIDENT 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	IRMGARD F METZ ASST SEC 525 JUNCTION RD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICKI L VILLACREZ TREASURER 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN R ERPENBACH ASST TREAS 525 JUNCTION RD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SANDRA L. GAYLOR ASST TREASURER 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NOEL C. HUTTON ASST TREASURER 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID P. JONES ASST TREASURER 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN P FITZELL ASST SECRETARY 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICKI L VILLACREZ SECRETARY 525 JUNCTION ROAD MADISON, WI 53717	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN G. HESS DIRECTOR 525 JUNCTION ROAD MADISON, WI 53717	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ IRMGARD F METZ	IRMGARD F METZ, ASST SEC	5/27/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.