

SCC eFile

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212530366

1.) CORPORATION NAME:

**PROFESSIONAL TELECONCEPTS, INC.**

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

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

SCC ID NO: **F1638883**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5132 STATE HWY 12 SOUTH

CITY/ST/ZIP: NORWICH, NY 13815

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: ERIC P BURRELL  
 TITLE: PRESIDENT  
 ADDRESS: RTE 12 S  
 PO BOX 303  
 NORWICH, NY 13815

OFFICER  DIRECTOR

NAME: JOSEPH BLIDY  
 TITLE: VICE PRESIDENT  
 ADDRESS: ROUTE 12 SOUTH  
 PO BOX 303  
 NORWICH, NY 13815

OFFICER  DIRECTOR

NAME: TARA J. FOX-WILLIS  
 TITLE: SEC/VP  
 ADDRESS: RTE 12 S  
 PO BOX 303  
 NORWICH, NY 13815

OFFICER  DIRECTOR

NAME: TOM HEALD  
 TITLE: VICE PRESIDENT  
 ADDRESS: ROUTE 12 SOUTH  
 PO BOX 303  
 NORWICH, NY 13815

OFFICER  DIRECTOR

NAME: STEPHEN T. MARSHALL  
 TITLE: EXEC. VP  
 ADDRESS: ROUTE 12 SOUTH  
 PO BOX 303  
 NORWICH, NY 13815

OFFICER  DIRECTOR

|  |   |          |
|--|---|----------|
| NAME: KERT STEWARD<br>TITLE: VICE PRESIDENT<br>ADDRESS: ROUTE 12 SOUTH<br>PO BOX 303<br>CITY/ST/ZIP/CO: NORWICH, NY 13815  | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |          |
| NAME: JAMES H HADDOX<br>TITLE: DIRECTOR<br>ADDRESS: 2800 POST OAK BLVD<br>STE 2600<br>CITY/ST/ZIP/CO: HOUSTON, TX 77056  | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |          |
| NAME: PETER B. O'BRIEN<br>TITLE: VP/AS<br>ADDRESS: 2800 POST OAK BLVD STE 2600<br>CITY/ST/ZIP/CO: HOUSTON, TX 77056  | <input checked="" type="checkbox"/> OFFICER <input 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/ PETER B. O'BRIEN   | PETER B. O'BRIEN, VP/AS   | 8/9/2012 |
| 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. |   |          |