

150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 845822 1. Entity Name AT&T CORP.	
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Principal Place of Business ONE AT&T WAY ROOM 4A235 BEDMINSTER, NJ 07921 US	Mailing Address ONE AT&T WAY ROOM 4A235 BEDMINSTER, NJ 07921 US
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DO NOT WRITE IN THIS SPACE

FILED

06 MAY -3 PM 4: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04262006 No Chg-P CR2E034 (11/05)

4. FEI Number 13-4924710	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEVF HORTON, THOMAS W ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DUAH, ANTOINETTE A ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

200074511702 05/12/06--01015--029 **3450.00 DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date: 4/28/06 Daytime Phone #: (908) 234-7414
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