FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

105 CARNEGIE CENTER

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business
100 LAKE STREET



FLORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400002937 (0)

RCN LONG DISTANCE COMPANY

PRINCETON NJ

Block 12 or Block 13 if changed, or on an attachment with an address

CITY-ST-ZIP

DALLAS PA 18612 PRINCETON NJ 08540 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/06/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 23-2598447 Not Applicable 26 Suite, Apt. #, etc Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country This corporation cwes or has paid the current year Intangible Personal Properly Tax due June 30. Zip Country 2ip Yes 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 A4 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent's gnature required when reinstating) Signature, typed or printed name of registered agent and let elif applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition CFOC DELETE Change TITLE 1.1 TRUE MCCOURT, DAVID C 1.2 NAME NAME 105 CARNEGIE CENTER STREET ADDRESS 1.3 STREET ADDRESS **PRINCETON NJ** CITY-ST-ZIP 14 CITY-ST-7(P DELETE Change Addition PC00 21 THE TITLE MAHONEY, MICHAEL J 22 NAME NAME 105 CARNEGIE CENTER 2 3 STREET ADDRESS STREET ADDRESS PRINCETON NJ 2.4 CHY-ST-ZIP CITY-ST-ZIP DELETE CFO/S Change ☐ Addition TITLE 3.1 TITLE **GODFREY, BRUCE G** 3.2 NAME NAME 105 CARNEGIE CENTER STREET ADDRESS 3.3 STREET ADDRESS **PRINCETON NJ** CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE NAME SAILE, JAMES 4. 2 NAME 105 CARNEGIE CENTER STREET ADDRESS 4.3 STREET ADDRESS **PRINCETON NJ** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition 5.1 TITLE TITLE OSTROSKI, RAYMOND B NAME 5.2 NAME 105 CARNEGIE CENTER 5.3 STREET ADDRESS STREET ADDRESS PRINCETON NJ 5.4 CITY - S1 - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE RALPH S. HROMISIN 6.2 NAME NAME 3105 CARNEGIE CENTER 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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