

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F94000006168**

1. Entity Name
ICG NetAhead, Inc.

FILED

00 APR 27 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
161 Inverness Drive West 161 Inverness Drive West
Englewood, CO 80112 Englewood, CO 80112
Atn: Legal Department

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Zip Country Zip Country

4. FEI Number Applied For
77-0317705 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CT Corporation System
c/o CT Corporation System
1200 South Pine Island Road
Plantation FL 33324

7. Name and Address of New Registered Agent
Name: Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
Tallahassee, FL
City: Tallahassee, FL Zip Cod: 32301

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.

SIGNATURE Carol K. Dolor Carol K. Dolor, Asst. VP 4/26/2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President and Director William S. Beans, Jr. 161 Inverness Dr. W Englewood, CO 80112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Exec. VP and Director Harry R. Herbst 161 Inverness Drive West Englewood, CO 80112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP, Gen. Counsel, Sec & Dir H. Don Teaque 161 Inverness Drive West Englewood, CO 80112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Senior Vice President James R. Washington 161 Inverness Drive West Englewood, CO 80112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Regina A. Vealiente 161 Inverness Drive West Englewood, CO 80112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President John V. Colgan 161 Inverness Drive West Englewood, CO 80112 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Additio

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13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dolor 4/24/2000 303-414-5000
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/99)



ACCOUNT NO. : 072100000032

REFERENCE : 664658 7189839

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 150.00

ORDER DATE : April 17, 2000

ORDER TIME : 2:20 PM

ORDER NO. : 664658-490

CUSTOMER NO: 7189839

CUSTOMER: Ms. Katy Ryan
Icg Communications, Inc.
161 Inverness Drive West

Englewood, CO 80112

CHANGE OF AGENT

NAME: ICG NETAHEAD, INC.

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

00 APR 27 PM 3:19

RECEIVED

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom