## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000000575

Entity Name: VERIZON NETWORK INTEGRATION CORP.

FILED Mar 04, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 52 E SWEDESFORD RD 52 E SWEDESFORD RD MALVERN, PA 19355 FRAZER, PA 19355 **Current Mailing Address: New Mailing Address:** 1717 ARCH STREET 21ST FLOOR PHILADELPHIA, PA 19103 US FEI Number: 23-2743964 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition Name: HESSAMI, SULEIMAN Name: 22001 LOUDOUN COUNTRY PARKWAY Address: Address: City-St-Zip: ASHBURN, VA 20147 City-St-Zip: VC Title: Title: () Delete () Change () Addition Name: OPLINGER, JON C Name: 52 E SWEDESFORD ROAD Address: Address: City-St-Zip: FRAZER, PA 19355 City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition VEATCH, MARCUS P MATTIOLA, PAUL L Name: Name: ONE VERIZON WAY ONE VERIZON WAY Address: Address: City-St-Zip: BASKING RIDGE, NJ 07920 City-St-Zip: BASKING RIDGE, NJ 07920 Title: () Delete Title: () Change () Addition SCHAPKER, JANE A Name: Name: Address: ONE VERIZON WAY Address: City-St-Zip: BASKING RIDGE, NJ 07920 City-St-Zip: Title: ( ) Delete Title: AS (X) Change ( ) Addition HEWES, LISA R Name: HEWES, LISA R Name: 52 E SWEDESFORD RD Address: 52 E SWEDESFORD RD Address: City-St-Zip: FRAZER, PA City-St-Zip: FRAZER, PA Title: () Delete Title: () Change () Addition GARRITY, JANET M Name: Name: 3900 WASHINGTON ST., 2ND FLOOR Address: Address: City-St-Zip: City-St-Zip: WILMINGTON, DE 19802

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL L. MATTIOLA V 03/04/2009