

**2004 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 28, 2001 8:00 am**  
**Secretary of State**

02-28-2001 90021 035 \*\*\*150.00

DOCUMENT # **F99000004356**

1. Entity Name  
**360NETWORKS (USA) INC.**

Principal Place of Business <del>149 UNION BLVD-</del> <del>SFE-900-</del> <del>LAKEWOOD CO 80228-</del>	Mailing Address <del>149 UNION BLVD-</del> <del>SFE-900-</del> <del>LAKEWOOD CO 80228</del>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>12101 Airport Way</b> Suite, Apt. #, etc.	3. Mailing Address <b>12101 Airport Way</b> Suite, Apt. #, etc.
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City & State <b>Broomfield CO</b>	City & State <b>Broomfield CO</b>
Zip <b>80021</b>	Zip <b>80021</b>
Country <b>USA</b>	Country <b>USA</b>

4. FEI Number **84-1496451** 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**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable.

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, 2001 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 11

TITLE PD	NAME THARP, JERRY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1575 DELUCCHI LANE, SUITE 224	CITY-ST-ZIP RENO NV 89502	
TITLE VSD	NAME STEVENSON, RON	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1575 DELUCCHI LANE, SUITE 224	CITY-ST-ZIP RENO NV 89502	
TITLE <del>DEED</del>	NAME LEDE, DAVID	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1575 DELUCCHI LANE, SUITE 224	CITY-ST-ZIP RENO NV 89502	
TITLE <del>DEED</del>	NAME LEDE, CLIFFORD	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1575 DELUCCHI LANE, SUITE 224	CITY-ST-ZIP RENO NV 89502	
TITLE SV	NAME LOVE, DAVID	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1575 DELUCCHI LANE, SUITE 224	CITY-ST-ZIP RENO NV 89502	
TITLE GC	NAME SUMMERS, PATRICK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1575 DELUCCHI LANE, SUITE 224	CITY-ST-ZIP RENO NV 89502	

TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<i>see attached list</i>		
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* **DAVID LOVE** X **2/20/01** **(303) 854-5000**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment #  
F99000004356

360networks (USA) inc. (Formerly Worldwide Fiber Networks, Inc.)  
 12101 Airport Way  
 Broomfield, CO 80021  
 Federal ID # 84-1496451

OFFICERS/DIRECTORS	TITLE	ADDRESS	PHONE #
Gregory Malfet	President, Director	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
Ronald Stevenson	Exec VP, Director	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
Catherine McEachern	Secretary	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
David Love	Senior VP	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
Bruce Tinney	VP of Bus Development	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
Patrick Summers	General Counsel	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
Larry Olsen	Treasurer	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
David Lede	Director	12101 Airport Way Broomfield, CO 80021	(303) 854-5000
Clifford Lede	Director	12101 Airport Way Broomfield, CO 80021	(303) 854-5000