

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 002260

1. Entity Name

GTE FLORIDA INCORPORATED

Principal Place of Business

Mailing Address

201 N. FRANKLIN ST  
FLTC0007  
TAMPA FL 33602  
US

~~600 HIDDEN RIDGE~~  
~~IRVING TX 75038~~  
US

2. Principal Place of Business

3. Mailing Address

1255 Corporate Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SVC04A43

City & State

City & State

Irving, TX

Zip

Country

Zip

Country

75038

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

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 11

TITLE PD ☐ Delete  
NAME FERRELL, JOHN A  
STREET ADDRESS ONE TAMPA CITY CENTER  
CITY-ST-ZIP TAMPA FL 33602

TITLE President ☒ Change ☐  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE EVPD ☐ Delete  
NAME APPEL, JOHN C.  
STREET ADDRESS 600 HIDDEN RIDGE  
CITY-ST-ZIP IRVING TX

TITLE ☐ Change ☐  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME WHITMAN, LAWRENCE R  
STREET ADDRESS 600 HIDDEN RIDGE  
CITY-ST-ZIP IRVING TX 75038

TITLE ☐ Change ☐  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME DROST, MARIANNE  
STREET ADDRESS 1255 CORPORATE DRIVE  
CITY-ST-ZIP IRVING TX 75038

TITLE ☐ Change ☐  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME MATELAND, L K JR  
STREET ADDRESS 600 HIDDEN RIDGE  
CITY-ST-ZIP IRVING TX 75038

TITLE ☐ Change ☐  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME WHITMAN, LAWRENCE R  
STREET ADDRESS 600 HIDDEN RIDGE  
CITY-ST-ZIP IRVING TX 75038

TITLE ☐ Change ☐  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Rosalynn Christian*  
Rosalynn Christian, Assistant Secretary 1/31/00

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

**FILED**  
**Feb 08, 2000 8:00 am**  
**Secretary of State**

02-08-2000 90148 040 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0397520

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**