

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845822

Entity Name: AT&T CORP.

Current Principal Place of Business:

ONE AT&T WAY
BEDMINSTER, NJ 07921-0752

Current Mailing Address:

ONE AT&T WAY
BEDMINSTER, NJ 07921-0752 US

FEI Number: 13-4924710

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

Officer/Director Detail :

Title ASSISTANT SECRETARY - TAX
Name DIORIO, KAREN
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title VP
Name KEISER, ANDREW B.
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title SECRETARY
Name WIRTZ, WAYNE A.
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title CHIEF FINANCIAL OFFICER AND
TREASURER
Name DUMAS, JESTON B.
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title VP
Name MATSUSHIMA, DAVID
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title PRESIDENT AND CHIEF EXECUTIVE
OFFICER
Name CHOW, ANNE
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title DIRECTOR
Name HATCH, G. TROY
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

Title DIRECTOR
Name DIAL, DEBRA L.
Address ONE AT&T WAY
City-State-Zip: BEDMINSTER NJ 07921-0752

I hereby 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 all other like empowered.

SIGNATURE: KAREN DIORIO

ASSISTANT SECRETARY - 05/31/2020
TAX

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date