

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000005455

**Entity Name:** NEW CINGULAR WIRELESS SERVICES, INC.

**Current Principal Place of Business:**

1025 LENOX PARK BLVD NE  
ATLANTA, GA 30319

**Current Mailing Address:**

675 WEST PEACHTREE ST NW  
SUITE 2756  
ATLANTA, GA 30308 US

**FEI Number:** 91-1379052

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
C/O 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 DIRECTOR  
Name JONES, NICK W.  
Address 1025 LENOX PARK BLVD NE  
City-State-Zip: ATLANTA GA 30319

Title PRESIDENT  
Name SHAY, BRIAN J.  
Address 1025 LENOX PARK BLVD NE  
City-State-Zip: ATLANTA GA 30319

Title TREASURER  
Name GOEKE, GEORGE B.  
Address 1025 LENOX PARK BLVD NE  
City-State-Zip: ATLANTA GA 30319

Title SECRETARY  
Name RYAN, WILLAM A.  
Address 1025 LENOX PARK BLVD NE  
City-State-Zip: ATLANTA GA 30319

Title ASSISTANT SECRETARY  
Name BLIZZARD, TERESA G.  
Address 1025 LENOX PARK BLVD NE  
City-State-Zip: ATLANTA GA 30319

*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:** TERESA G. BLIZZARD

**ASSISTANT SECRETARY 04/20/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date