

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90093 035 ***150.00

DOCUMENT # 002260

1. Corporation Name

GTE FLORIDA INCORPORATED

Principal Place of Business

201 N. FRANKLIN ST
FLTC0007
TAMPA FL 33602
US

Mailing Address

600 HIDDEN RIDGE
HOEO3H10
IRVING TX 75038
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1901

4. FEI Number

59-0397520

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DAKS, PETER A
STREET ADDRESS 201 N. FRANKLIN ST
CITY-ST-ZIP TAMPA FL ☒ DELETE

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

TITLE SVP
NAME DINSMORE, GERALD K
STREET ADDRESS 600 HIDDEN RIDGE
CITY-ST-ZIP IRVING TX ☒ DELETE

TITLE S
NAME SOMES, CHARLES J.
STREET ADDRESS 600 HIDDEN RIDGE
CITY-ST-ZIP IRVING TX ☒ DELETE

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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☒ Addition
1.2 NAME JOHN A. FERRELL
1.3 STREET ADDRESS ONE TAMPA CITY CENTER
1.4 CITY-ST-ZIP TAMPA, FL 33602

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE VP ☒ Change ☐ Addition
3.2 NAME LAWRENCE R. WHITMAN
3.3 STREET ADDRESS 600 HIDDEN RIDGE
3.4 CITY-ST-ZIP IRVING, TX 75038

4.1 TITLE S ☐ Change ☒ Addition
4.2 NAME MARIANNE DROST
4.3 STREET ADDRESS 1255 CORPORATE DRIVE
4.4 CITY-ST-ZIP IRVING, TX 75038

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rosalynn Christian
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/99
Date

972/507-5275
Daytime Phone #

CR2E034 (11/98)

0541914