2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 017944

Entity Name: EMBARQ FLORIDA, INC.

Apr 23, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

5454 W. 110TH STREET US OVERLAND PARK, KS 66211

Current Mailing Address: New Mailing Address:

5454 W. 110TH STREET 5454 W. 110TH STREET OVERLAND PARK, KS 66211 US KSOPKJO802-8007 OVERLAND PARK, KS 66211

FEI Number: 59-0248365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATE SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

City-St-Zip:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OVERLAND PARK, KS 66251

OVERLAND PARK, KS 66251

OFFICERS AND DIRECTORS:

City-St-Zip:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: () Delete Title: (X) Change () Addition BESHEARS, MARK V CHEEK, WILLIAM E Name: Name: 6500 SPRINT PKWY 5454 W 110TH ST Address: Address:

City-St-Zip: OVERLAND PARK, KS 66251 City-St-Zip: OVERLAND PARK, KS 66211

Title: VP/T Title: () Delete (X) Change () Addition Name: HYDE, MICHAEL T Name: MEREDITH, LESLIE H 6200 SPRINT PKWY 5454 W 110TH ST Address: Address:

OVERLAND PARK, KS 66211 (X) Change () Addition Title: () Delete Title: S/D BETTS, GENE M TOUSSAINT, CLAUDIA S Name: Name:

5454 W 110TH STREET 5454 W. 110TH STREET Address: Address: City-St-Zip: OVERLAND PARK, KS 66211 City-St-Zip: OVERLAND PARK, KS 66211

Title: P/D () Delete Title: AS (X) Change () Addition FULLER, MICHAEL B APEL, THOMAS C Name: Name:

Address: 5454 W. 110TH STREET Address: 5454 W. 110TH STREET OVERLAND PARK, KS 66211 US

City-St-Zip: City-St-Zip: OVERLAND PARK, KS 66211 US

Title: (X) Delete Title: () Change () Addition TOUSSAINT, CLAUDIA S Name: Name: 6200 SPRINT PKWY Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS C APEL AS 04/23/2007