


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 91012 015 \*\*\*150.00

DOCUMENT # 018058	
1. Entity Name QUINCY TELEPHONE COMPANY	

Principal Place of Business 525 JUNCTION ROAD SUITE 7000 MADISON, WI 53717 US	Mailing Address P.O. BOX 22995 P.O. BOX 22995 KNOXVILLE, TN 37933-0995 US
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2. Principal Place of Business 107 W. Franklin St.	3. Mailing Address
Suite, Apt. #, etc. P.O. Box 189	Suite, Apt. #, etc.
City & State Quincy, FL	City & State
Zip 32351	Country US

04142004 Chg-P CR2E034 (10/03)

4. FEI Number 59-0413860	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301	
7. Name and Address of New Registered Agent	
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WITTEW, DAVID A		NAME		
STREET ADDRESS	525 JUNCTION RD		STREET ADDRESS		
CITY-ST-ZIP	MADISON, WI 53717		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGORY, DANIEL V		NAME		
STREET ADDRESS	8501 EXCELSIOR DR		STREET ADDRESS		
CITY-ST-ZIP	MADISON, WI 53717		CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONRAD, MARKS		NAME		
STREET ADDRESS	301 S WESTFIELD RD		STREET ADDRESS		
CITY-ST-ZIP	MADISON, WI 537171799		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASTERS, JERRY		NAME		
STREET ADDRESS	8501 EXCELSIOR DR		STREET ADDRESS		
CITY-ST-ZIP	MADISON, WI 53717		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUCHEON, DAVE		NAME		
STREET ADDRESS	9737 COGDILL RD SUITE 230		STREET ADDRESS		
CITY-ST-ZIP	KNOXVILLE, TN 37932		CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANDOW, MICHAEL A		NAME		
STREET ADDRESS	8501 EXCELSIOR DR		STREET ADDRESS		
CITY-ST-ZIP	MADISON, WI 53717		CITY-ST-ZIP		

12. 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 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sandra L. Gaylor* Sandra L. Gaylor 4.20.04 8105.671.4820  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

5404222 B  
#018058

Quincy Telephone Company 59-0413860  
Document # 018058  
Officers & Directors

Title D, P  
Name Pandow, Michael A.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title D, VP  
Name Wittwer, David A.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title D, VP  
Name Gregory, Daniel V.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title D, VP  
Name Masters, Jerry W.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title VP  
Name Cefalu, Kathy E.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title VP  
Name Pederson, Paul E.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title VP  
Name Barnes, G. Ronnie  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717

Title VP  
Name Holcomb, J. Frank  
Street Address 107 W. Franklin St  
City, State, Zip Quincy, FL 32351-2310

Title Secretary/Treasurer \*  
Name Gaylor, Sandra L.  
Street Address 9737 Cogdill Rd  
Street Address Suite 230  
City, State, Zip Knoxville, TN 37932

Title Assistant Treasurer  
Name Samples, Karen M.  
Street Address 9737 Cogdill Rd  
Street Address Suite 230  
City, State, Zip Knoxville, TN 37932

Title Assistant Treasurer  
Name Bradley, Barbara E.  
Street Address 9737 Cogdill Rd  
Street Address Suite 230  
City, State, Zip Knoxville, TN 37932

Title Assistant Secretary  
Name Conatser, Phyllis A.  
Street Address 9737 Cogdill Rd  
Street Address Suite 230  
City, State, Zip Knoxville, TN 37932

Title Assistant Secretary  
Name Perry, Everett H.  
Street Address 525 Junction Rd  
City, State, Zip Madison, WI 53717