## 2003 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT# 018058**

Entity Name: QUINCY TELEPHONE COMPANY

FILED Apr 10, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
107 W FRA P.O. BOX QUINCY, F		US				
Current Mailing Address:				New Mailing Address:		
P.O. BOX P.O. BOX KNOXVILL		1995 US				
FEI Number: 59-0413860 FEI Number Applied For ( ) FEI Number		FEI Numb	Imber Not Applicable ( ) Certificate of Status Desired ( )			
Name and	Address of C	Current Registered Agent:	ı	Name and	Address of	New Registered Agent:
	B, JAMES F RANKLIN STRE FL 32353 U	EET IS				
	named entity : e of Florida.	submits this statement for the p	urpose of	changing it	s registered	office or registered agent, or both,
SIGNATUR	RE:					
		nic Signature of Registered Age	nt			Date
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VD ( ) WITTWER, DA' 301 S WESTFI MADISON, WI	ELD RD	1	Fitle: Name: Address: City-St-Zip:	VD WITTWER, E 525 JUNCTIO MADISON, W	DN RD
Title: Name: Address: City-St-Zip:	VD ( ) GREGORY, DA 301 S WESTFI MADISON, WI	ELD RD	1 4	Fitle: Name: Address: City-St-Zip:	VD GREGORY, I 8501 EXCEL MADISON, W	SIOR DR
Title: Name: Address: City-St-Zip:	VP ( ) CONRAD, MAR 301 S WESTFI MADISON, WI	ELD RD	1	Fitle: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VD ( ) MASTERS, JEF 301 S WESTFI MADISON, WI	ELD RD	1 4	Fitle: Name: Address: City-St-Zip:	VD MASTERS, J 8501 EXCEL MADISON, W	SIOR DR
Title: Name: Address: City-St-Zip:	LUCHEON, DA	. RD SUITE 230	1 4	Fitle: Name: Address: City-St-Zip:		()Change ()Addition
Title: Name: Address: City-St-Zip:	PD ( ) PANDOW, MIC 301 S WESTFI MADISON WI	ELD RD	1 4	Fitle: Name: Address: City-St-Zip:	PD PANDOW, M 8501 EXCEL MADISON W	SIOR DR

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID J. LUCHEON T 04/10/2003

EVERETT H. PERRY -ASSISTANT SECRETARY 301 S. WESTFIELD RD MADISON, WI 53717

PHYLLIS A. CONATSER -ASSISTANT SECRETARY 9737 COGDILL RD SUITE 230 KNOXVILLE, TN 37932

ROBERT J. LEXVOLD -ASSISTANT TREASURER 9737 COGDILL RD SUITE 230 KNOXVILLE, TN 37932

J. FRANK HOLCOMB VP 107 W. FRANKLIN ST QUINCY, FL 32351-2310

G. RONNIE BARNES VP 9737 COGDILL RD SUITE 230 KNOXVILLE, TN 37932

PAUL E. PEDERSON VP 525 JUNCTION RD MADISON, WI 53717