


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90427 032 ***150.00

DOCUMENT # 828088 1. Entity Name NORTEL NETWORKS INC.	
--	---

Principal Place of Business 2221 LAKESIDE BLVD. RESEARCH TRIANGLE PARK, NC 75082-4399 US	Mailing Address 4001 E CHAPEL HILL NELSON HWY DURHAM, NC 27709 US
--	---

40089993



DO NOT WRITE IN THIS SPACE

04172007 No Chg-P CR2E034 (11/05)

4. FEI Number 04-2486332	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS EGAN, LYNN C 220 ATHENS WAY NASHVILLE, TN 372281397
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KIMBERLY, POE P 2370 PERFORMANCE DR RICHARDSON, TX 75082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KREBS, LAURIE A 4001 E CHAPEL HILL NELSON RTP, NC 27709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HIGGINBOTHAM, ERNEST R 2221 LAKESIDE BLVD RICHARDSON, TX 750824399
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LASALLE, WILLIAM J 8200 DIXIE RD STE 100 BRAMPTON, ON L6T5P6,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SLEDGE, KAREN E 2221 LAKESIDE BLVD RICHARDSON, TX 75082

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Laurie A. Krebs 4/26/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #