

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # F00000001052**1. Entity Name
FIBERCO TELECOMMUNICATIONS CORPORATION

Principal Place of Business

1209 ORANGE STREET

WILMINGTON

19801

DE

Mailing Address

1209 ORANGE STREET

WILMINGTON

19801

DE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION

33324

US

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

01/30/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME MCEVOY MICHAEL R
STREET ADDRESS 700 MIDTOWN TOWER
CITY-ST-ZIP ROCHESTER NY 14604TITLE D ☒ Change ☐ Addition
NAME MCEVOY MICHAEL R
STREET ADDRESS 700 MIDTOWN TOWER
CITY-ST-ZIP ROCHESTER NY 14604TITLE D ☐ Delete
NAME BRANDT SUSAN M
STREET ADDRESS 12 CHIPMONK TRAIL
CITY-ST-ZIP PITTSFORD NY 14534TITLE D ☒ Change ☐ Addition
NAME BRANDT SUSAN M
STREET ADDRESS 12 CHIPMONK TRAIL
CITY-ST-ZIP PITTSFORD NY 14534TITLE D ☐ Delete
NAME ANDERSON THOMAS R
STREET ADDRESS 277 NORTH GOODMAN STREET, #404
CITY-ST-ZIP ROCHESTER NY 14607TITLE D ☒ Change ☐ Addition
NAME ANDERSON THOMAS R
STREET ADDRESS 277 NORTH GOODMAN STREET, #404
CITY-ST-ZIP ROCHESTER NY 14607TITLE SD ☐ Delete
NAME RYAN MARC J
STREET ADDRESS 953 DUNLOP AVENUE
CITY-ST-ZIP OUTREMONT, QUEBEC, CANADATITLE SD ☒ Change ☐ Addition
NAME RYAN MARC J
STREET ADDRESS 300 ALLÉE GLENDALE
CITY-ST-ZIP OUTREMONT, QUEBEC, CANADA QC H2V 4V5TITLE PD ☐ Delete
NAME MCGEE TIMOTHY E
STREET ADDRESS 79 DAWLISH AVE.
CITY-ST-ZIP TORONTO, ONT., CANADATITLE PD ☒ Change ☐ Addition
NAME MCGEE TIMOTHY E
STREET ADDRESS 79 DAWLISH AVE.
CITY-ST-ZIP TORONTO, ONT., CANADA ON M4N 1H2TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marc J. Ryan

SD

01/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)