## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000002797

FILED Jun 28, 2006 Secretary of State

Entity Nar	me: BIRCH T	ELECOM OF THE SOUTH, IN	NC.		•	
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:		
2300 MAIN SUITE 600 KANSAS (	ISTREET ) CITY, MO 6410	082415				
Current M	ailing Addres	ss:	New Maili	New Mailing Address:		
2300 MAIN SUITE 600 KANSAS (		082415				
FEI Number:	: 43-1877678	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
1201 HAYS TALLAHAS The above in the State	S STREET SSEE, FL 323 named entity e of Florida.		purpose of changing	its registered	office or registered agent, or bot	:h,
SIGNATU		nic Signature of Registered Ac	ront		 Date	_
Election Car		g Trust Fund Contribution ( ).	geni		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PCED ( CASSITY, G. M 2020 BALTIMO KANSAS CITY,	RE AVENUE	Title: Name: Address: City-St-Zip:	DUBE, STEP 2300 MAIN S	X) Change()Addition HEN TREET, SUITE 600 /, MO 641082415	
Title: Name: Address: City-St-Zip:	VSD ( LAWHON, GRE 2020 BALTIMO KANSAS CITY,	RE AVENUE	Title: Name: Address: City-St-Zip:	PETERSON, 2300 MAIN S	X) Change()Addition THOMAS A TREET, SUITE 600 /, MO 641082415	

Title: SVPD (X) Delete Title: () Change () Addition LAWHON, GREGORY C Name: Name:

2020 BALTIMORE AVE. Address: Address: KANSAS CITY, MO 64108 City-St-Zip: City-St-Zip:

(X) Delete

TIMMER, JAMES G

2020 BALTIMORE AVENUE

KANSAS CITY, MO 64108

Title:

Name:

Address:

City-St-Zip:

SVT

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: THOMAS A. PETERSON **CFO** 06/28/2006

() Change () Addition