2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 21, 2006 8:00 am Secretary of State

ANNUAL REPORT						Secretary of State					
DOCUMENT # F00000004441							03-21-200	•			
1. Entity Nam QUALITY	TELEPHONE INC.		!								
Principal Place		Mailing Address PO BOX 7310				\$002200					
STE 400 DALLAS, TX 75202		DALLAS, TX 75209						(† 40 11) 10 41) 610 11 ()		
2. Principal Place of Business 7777 N. J. H. Mmons Frwy		3. Mailing Address									
Suite, Apt. #, etc. # 70 /		Suite, Apt. #, etc.			03062006	Chg-P	CR2E034	(11/05)			
Scity & State TX		City & State			4. FEI Number 75-2935927		Applied For Not Applicable				
7,20	07 Country	Zip				5. Certificate of Status Desired See Required Fee Required					
	6. Name and Address of Current I	Registered Agent		N		7. Name and	Address of New R	legistered Age	ent		
BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD				Name Street Address (P.O. Box Number is Not Acceptable)							
SUITE 101 TALLAHASSEE, FL 32301-2960											
·				City FL Zip Code							
	named entity submits this statement for ions of registered agent.	the purpose of changing its	register	ed office or	register	ed agent, or bo	th, in the State of Flo	orida. I am fan	niliar with,	and accept	
SIGNATURE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.						00 May Be ed to Fees					
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS	CHANGES TO OFF	ICERS AND D	RECTORS	S IN 11	
TITLE	P MCGOVERN, FRANCIS X	☐ Delete	TITL		Pre	Sident	3.C		Change	Addition	
STREET ADDRESS CITY+ST-ZIP	301 N MARKET ST STE 400 DALLAS, TX 75202	N MARKET ST STE 400		EET ADORESS '+ST-ZIP	THE TOTAL PROPERTY OF THE COURT						
TITLE NAME	EXVP HOUGHTALIN, JAMES J	☐ Defete	TITL	E	Exec Tan	utive Vi	ce - Presida	ent D	Change	Addition	
STREET ADDRESS	301 N MARKET ST STE 400 DALLAS, TX 75202		STR	EET ADORESS	277	70.5+	ghtalin mmons F	rwy#	701		
TITLE	DALLAG, IX 13232	☐ Delete	TITL	E		<u>, (up , 1</u>	<u> </u>		Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP				EET ADORESS '- ST-ZIP							
TITLE NAME		☐ Delete	TITL NAM					E	Change	Addition	
STREET ADDRESS			STRE	EET ADDRESS							
TITLE		☐ Delete	TITL	E					Change	Addition	
STREET ADDRESS				EET ADDRESS							
CITY-ST-ZIP		☐ Delete	TITL	-ST-ZIP E					Change	Addition	
NAME			NAM	IE							

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-SI-ZIP

LEIGNATURE AND TYPED OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

03-01-2006

x 626