2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004976

Entity Name: CINCINNATI BELL TECHNOLOGY SOLUTIONS INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	FOURTH STRE FI, OH 45202	EET				
Current Mailing Address:				New Mailing Address:		
1122 CAPITAL TEXAS HIGHWAY S. AUSTIN, TX 78746				201 EAST FOURTH STREET CINCINNATI, OH 45202		
FEI Number: 31-1581935 FEI Number Applied For () FEI Nu			FEI Num	mber Not Applicable () Certificate of Status Desired ()		
Name and	Address of Cu	ırrent Registered Agent:		Name and	d Address of New Registered Agent:	
1201 HAYS TALLAHAS	SEE, FL 3230 named entity si	1 US	rpose of	^r changing it	its registered office or registered agent, or both,	
SIGNATUR	E:					
	Electroni	c Signature of Registered Agen	t		Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS	AND DIRECT	ORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () I LACKEY, JEFF 201 EAST FOUR CINCINNATI, OH			Title: Name: Address: City-St-Zip:	P (X) Change () Addition CASSIDY, JOHN F 201 EAST FOURTH STREET CINCINNATI, OH 45202	
Title: Name: Address: City-St-Zip:	AS () I COLLINS, AMY 201 E 4TH STRE CINCINNATI, OH			Title: Name: Address: City-St-Zip:	S (X) Change () Addition COLLINS, AMY 201 E 4TH STREET CINCINNATI, OH 45202	
Title: Name: Address: City-St-Zip:	SRVP () I MC CANN, MARY 201 EAST FOUR CINCINNATI, OH	TH STREET		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SMITH, JEFFRE	F TEXAS HWY SOUTH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I PETERSON, MA 201 EAST FOUR CINCINNATI, OH	TH STREET		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I SCHILLING, THO 201 E 4TH ST CINCINNATI, OH			Title: Name: Address: City-St-Zip:	D (X) Change () Addition BROWN, SHANE 201 E 4TH ST CINCINNATI, OH 45202	

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: AMY COLLINS S 04/28/2004