

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2005 8:00 am**  
**Secretary of State**

02-23-2005 90086 025 \*\*\*150.00

20015474



<b>DOCUMENT # F00000007051</b> 1. Entity Name <b>BELLSOUTH AFFILIATE SERVICES CORPORATION</b>					
Principal Place of Business <b>1155 PEACHTREE STREET, SITE 1800 SUITE 1800 ATLANTA, GA 30309-3610</b>			Mailing Address <b>1155 PEACHTREE STREET, SITE 1800 SUITE 1800 ATLANTA, GA 30309-3610</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>58-2425071</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MARTINEZ, EDWARD</b> <b>STE 6010 250 WILLIAMS ST</b> <b>ATLANTA, GA 30303</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSGC</b> <b>JOHNSON, FREDERICK W</b> <b>675 W. PEACHTREE STREET, SUITE 4300</b> <b>ATLANTA, GA 30375</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DEVP</b> <b>WENTWORTH, LYNN</b> <b>1155 PEACHTREE ST., NE. #2006</b> <b>ATLANTA, GA 303093610</b>	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>IRVINE, JOYCE C</b> <b>1155 PEACHTREE STREET NE SUITE 1800</b> <b>ATLANTA, GA 303093610</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPI</b> <b>Droege, Mark E.</b> <b>1155 Peachtree Street, NE, #1704</b> <b>Atlanta, GA 30309-3610</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			

SIGNATURE:

*Joyce Clower Irvine*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joyce Clower Irvine, Assistant Secretary

ATTACHMENT  
FO00000067051  
260 15474

**BELLSOUTH AFFILIATE SERVICES CORPORATION**  
**(Business Address)**

**Directors**

**Mark E. Droege**  
**Suite 1704**  
**1155 Peachtree Street, NE**  
**Atlanta, GA 30309-3610**

**Officers**

**Edward P. Martinez, President**  
**Suite 6010, 250 Williams Street**  
**Atlanta, Georgia 30303**

**Frederick W. Johnson, Vice President, Secretary and General Counsel**  
**Suite 4300**  
**675 W. Peachtree Street, NW**  
**Atlanta, Georgia 30375**

**Mark E. Droege, EVP and Treasurer**  
**Suite 1704**  
**1155 Peachtree Street, NE**  
**Atlanta, Georgia 30309-3610**

**Joyce Clower Irvine, Assistant Secretary**  
**Suite 1800**  
**1155 Peachtree Street, NE**  
**Atlanta, Georgia 30309-3610**