

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # F01000004868

1. Entity Name  
TELEGLOBE COMMUNICATIONS CORPORATION



FILED

03 MAY -1 AM 11:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
11480 COMMERCE PARK DRIVE  
RESTON VA 20191

Mailing Address  
11480 COMMERCE PARK DRIVE  
RESTON VA 20191

2. Principal Place of Business  
11495 Commerce Park Dr.  
Suite, Apt. #, etc.

3. Mailing Address  
11495 Commerce Park Dr.  
Suite, Apt. #, etc.

City & State  
Reston, VA

City & State  
Reston, VA

4. FEI Number 54-1823267

Applied For  
Not Applicable

Zip 20191 Country USA

Zip 20191 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

## 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME CHILDERS, CHARLES ☒ Delete  
STREET ADDRESS 11480 COMMERCE PARK DRIVE  
CITY-ST-ZIP RESTON VA 20191

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP 300017813033 ☐ Change ☐ Addition

TITLE VP  
NAME MONGRAIN, ANDRE ☐ Delete  
STREET ADDRESS 11480 COMMERCE PARK DRIVE  
CITY-ST-ZIP RESTON VA 20191

TITLE SV  
NAME Andre Mongrain ☒ Change ☐ Addition  
STREET ADDRESS 11495 Commerce Park Dr.  
CITY-ST-ZIP Reston, VA 20191

TITLE VSD  
NAME BRUNETTE, JOHN S ☐ Delete  
STREET ADDRESS 11480 COMMERCE PARK DRIVE  
CITY-ST-ZIP RESTON VA 20191-1531

TITLE VSD  
NAME John Brunette ☒ Change ☐ Addition  
STREET ADDRESS 11495 Commerce Park Dr.  
CITY-ST-ZIP Reston, VA 20191

TITLE VP  
NAME SCHWARTZ, ROBERT ☒ Delete  
STREET ADDRESS 11480 COMMERCE PARK DRIVE  
CITY-ST-ZIP RESTON VA 20191

TITLE AS  
NAME A. Kieran Bustamante ☐ Change ☒ Addition  
STREET ADDRESS 11495 Commerce Park Dr.  
CITY-ST-ZIP Reston, VA 20191

TITLE VD  
NAME FORTIN, SERGE ☒ Delete  
STREET ADDRESS 11480 COMMERCE PARK DRIVE  
CITY-ST-ZIP RESTON VA 20191-1531

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS  
NAME MORGAN, KATHLEEN ☐ Delete  
STREET ADDRESS 11480 COMMERCE PARK DRIVE  
CITY-ST-ZIP RESTON VA 20191

TITLE AS  
NAME Kathleen Morgan ☒ Change ☐ Addition  
STREET ADDRESS 11495 Commerce Park Dr.  
CITY-ST-ZIP Reston, VA 20191

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathleen Morgan 4/28/03 703-755-2000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)



242

CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 075955 4340636

AUTHORIZATION :

*Patricia Pizot*

COST LIMIT : \$ 150.00

ORDER DATE : April 30, 2003

ORDER TIME : 9:56 AM

ORDER NO. : 075955-010

CUSTOMER NO: 4340636

CUSTOMER: Ms. Kelli Haley  
Jones Day  
2727 North Harwood Street  
Dallas, TX 75201-1515

ANNUAL REPORT FILING

NAME: TELEGLOBE COMMUNICATIONS  
CORPORATION

RECEIVED  
03 MAY - 1 AM 12:30  
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 1155

EXAMINER'S INITIALS: \_\_\_\_\_