2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPURI							(Fare \$ 3 are												
DOCUMENT # F01000006161						_		; ()											
1. Entity Name																			
VERIZON DIRECTORIES CORP.							06 JAN 12 P												
Principal Place	o of Pusinger		Molling Address		40.81	-	ALLAMA LEE,	ofATE	:										
2200 WEST			Mailing Address ATTN: LEGAL DEPT	· .			ALLIJan die,	LORID	Д										
		ORT, TX 75261-9810	2200 W. AIRFIELD DRIVE, P.O. BOX 619810																
DALLAS/FT. WORTH AIRPO					TX 75261-981	10 US		11) 36 111 38 11 3 3 2	300 (1 910 0 1101 170)										
2. Principal P	lace of Busin	ess	3. Mailing Address																
Cuito Act # ata			College April W. co.			_ (2))	181 11814 B1161 1181	### IV 1881									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			70105200		CR2E0	34 (11/05)										
City & State			City & State			4. FEI Nun 75-26	nber 666092			plied For Applicable									
Zip	Country		Zip Count		itry	5. Certificate of Status Desired S8.75 Additional Fee Required													
	6. Name	and Address of Current F	Registered Agent		Name	7. Name a	nd Address of New F	Registered A	lgent										
C T CORPORATION SYSTEM																			
1200 SOUT		SLAND ROAD			Street Address (P.O. Box Number is Not Acceptable)														
FLANTAII	ON, FL 3.	3324																	
					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 little if applicable. (NOTE Registered Agent signature required when reinstating) DATE																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees																			
10.		OFFICERS AND (DIRECTORS	11.		ADDITION	I IS/CHANGES TO OFF	ICERS AND	DIRECTORS	IN 11									
TITLE	VP	Q171021101110	☐ Delete	E				☐ Change	Addition										
NAME	COTICCHIO, ANDREW				E .	200064414462 01/25/0601003022 **150,00													
CITY-ST-ZIP	TREET ADDRESS 2200 WEST AIRFIELD DRIVE ITY-SI-ZIP DALLAS-FT. WORTH AIRPORT, TX 752619810				ET ADDRESS -ST-ZIP	01/2:	2/.0001002_	-922	<i>ች</i> ቶ [ጋሀ. ሀ	it									
TITLE	VD Delete				E				Change	Addition									
NAME	MUNDY, WILLIAM G DORESS 2200 WEST AIRFIELD DRIVE				E														
STREET ADDRESS CITY-ST-ZIP		ST AIRFIELD DRIVE FT. WORTH AIRPORT,	TX 752619810	4	ET ADORESS - ST- ZIP														
TITLE	PD Delete				E				☐ Change	Addition									
NAME	HARLESS, KATHERINE J				EET ADDRESS														
STREET ADDRESS CITY-ST-ZIP																			
TITLE	S Delete				- ST- ZIP E				☐ Change	☐ Addition									
NAME	SKOGEN, SANDRA L				KE				,-										
STREET ADDRESS CITY+ST-ZIP					EET ADDRESS '-ST-ZIP														
TITLE	DALLAS-FT. WORTH AIRPORT, TX 752619810 VP					nine Vical	President / Nic	a obox	∑ Change	☐ Addition									
NAME	GATTO, FRANK P				E C	ritor vice i	President/Dir	ecior	7										
STREET ADDRESS					EET ADDRESS														
CITY-ST-ZIP	DALLAS-FT. WORTH AIRPORT, TX 752619810 CON Delete				Y-ST-ZIP E	<u>.</u>			☐ Change	☐ Addition									
NAME	BECK, DANE E				KE				- Ollesige										
STREET ADDRESS	1	ST AIRFIELD DRIVE	TV 750040040	4	EET ADORESS					ł									
CITY-ST-ZIP DALLAS-FT. WORTH AIRPORT, TX 752619810 CITY-ST-ZIP 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.																			
SIGNATURE: Sandra CS/Cogn 1/9/06 978-453-7160																			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Phone #																			
· 		SundaT	$\leq \langle m \rangle_{\alpha} \leq$	00 10	122				Sanda / Sloven Sock tack										