

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2007 8:00 am**  
**Secretary of State**

04-20-2007 90200 050 \*\*\*150.00

**DOCUMENT # F02000004508**

1. Entity Name  
**VERIZON GLOBAL NETWORKS INC.**



Principal Place of Business  
**1320 NORTH COURT HOUSE RD.  
ARLINGTON, VA 22201**

Mailing Address  
**1717 ARCH STREET  
21ST FL  
PHILADELPHIA, PA 19103**

**50001475**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04102007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

**54-1885546**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

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, 2007 Fee will be \$550.00**

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 **CFOS** ☒ Delete  
NAME **BOUCHER, VIRGINIA E**  
STREET ADDRESS **600 HIDDEN RIDGE**  
CITY-ST-ZIP **IRVING, TX 75038**

TITLE **CFOS** ☐ Change ☒ Addition  
NAME **JACKSON, Curtis J.**  
STREET ADDRESS **ONE VERIZON WAY**  
CITY-ST-ZIP **BASKING RIDGE, NJ 07920**

TITLE **T** ☐ Delete  
NAME **FITZMIRE, ROBERT S**  
STREET ADDRESS **3900 WASHINGTON STREET**  
CITY-ST-ZIP **WILMINGTON, DE 19802**

TITLE **D** ☐ Change ☐ Addition  
NAME **PENBERTHY, HELEN K.**  
STREET ADDRESS **1320 N. COURT HOUSE ROAD**  
CITY-ST-ZIP **ARLINGTON, VA 22201**

TITLE **D** ☒ Delete  
NAME **WEGLEITMER, MARK A**  
STREET ADDRESS **2980 FAIRVIEW PARK DR**  
CITY-ST-ZIP **FALLS CHURCH, VA 22042**

TITLE **P** ☐ Delete  
NAME **FAIRBAIRN, DONALD B**  
STREET ADDRESS **6404 IVY LANE**  
CITY-ST-ZIP **GREENBELT, MD 20770**

TITLE **P** ☐ Delete  
NAME **FAIRBAIRN, DONALD B**  
STREET ADDRESS **6404 IVY LANE**  
CITY-ST-ZIP **GREENBELT, MD 20770**

TITLE **AS** ☐ Delete  
NAME **MASON, J. DANIEL**  
STREET ADDRESS **ONE VERIZON WAY**  
CITY-ST-ZIP **BASKING RIDGE, NJ 07920**

TITLE **AS** ☐ Delete  
NAME **MASON, J. DANIEL**  
STREET ADDRESS **ONE VERIZON WAY**  
CITY-ST-ZIP **BASKING RIDGE, NJ 07920**

TITLE **V** ☐ Delete  
NAME **CRAIN, JANA L**  
STREET ADDRESS **1717 ARCH ST 21ST FL**  
CITY-ST-ZIP **PHILADELPHIA, PA 19103**

TITLE **V** ☐ Delete  
NAME **CRAIN, JANA L**  
STREET ADDRESS **1717 ARCH ST 21ST FL**  
CITY-ST-ZIP **PHILADELPHIA, PA 19103**

TITLE **V** ☐ Delete  
NAME **CRAIN, JANA L**  
STREET ADDRESS **1717 ARCH ST 21ST FL**  
CITY-ST-ZIP **PHILADELPHIA, PA 19103**

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

**Jana L. Crain, Vice Pres-Taxes**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4/12/07**

**215-466-4185**