

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007916

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: TELECOM NEW ZEALAND USA LIMITED INC.

**Current Principal Place of Business:**

99 S. LAKE AVE., STE. 500  
PASADENA, CA 91101

**New Principal Place of Business:**

**Current Mailing Address:**

99 S. LAKE AVE., STE. 500  
PASADENA, CA 91101

**New Mailing Address:**

FEI Number: 94-3259730      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TCS CORPORATE SERVICES, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C      ( ) Delete  
Name: BRISCOE, ANTHONY N.  
Address: 99 S. LAKE AVE., STE. 500  
City-St-Zip: PASADENA, CA 91101

Title: VCP      ( ) Delete  
Name: MILLER, LAURIE  
Address: 99 S. LAKE AVE., STE. 500  
City-St-Zip: PASADENA, CA 91101

Title: D      ( ) Delete  
Name: NEALE, IAN A.  
Address: 99 S. LAKE AVE., STE. 500  
City-St-Zip: PASADENA, CA 91101

Title: D      (X) Delete  
Name: VAN WOERKOM, JOHN B.  
Address: 99 S. LAKE AVE., STE. 500  
City-St-Zip: PASADENA, CA 91101

Title: VPT      ( ) Delete  
Name: JEFFERIS, DAVID A.  
Address: 99 S. LAKE AVE., STE. 500  
City-St-Zip: PASADENA, CA 91101

Title: S      (X) Delete  
Name: SCOTT, RICHARD  
Address: 99 S. LAKE AVE., STE. 500  
City-St-Zip: PASADENA, CA 91101

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID A. JEFFERIS

VPT

01/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date