2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

F93000000265 DOCUMENT

1. Entity Name



Mar 10, 2003 8:00 am §
Secretary of State 03-10-2003 90141 020 ***150.00 BROADWING TELECOMMUNICATIONS INC. Principal Place of Business Mailing Address **00157000** 1122 CAPITAL OF TEXAS HWY. SO. 1122 CAPITAL OF TEXAS HWY. SO. **AUSTIN TX 78746** AUSTIN TX 78746 US LIS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 72-1122018 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name -CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City 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 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete TITLE TITI F ☐ Change Addition ELLENBERGER, RICHARD G Kevin W. Mooney 201 E 4th Street NAME NAME 201 E 4TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CINCINNATI OH 45202 CITY-ST-ZIP 04 45202

TITLE ☐ Delete TITLE ☐ Change Addition WILLIAMS, GORDON NAME NAME STREET ADDRESS 1122 CAPITAL OF TEXAS HWY SO. STREET ADDRESS CITY-ST-ZIP AUSTIN TX 78746 CITY-ST-ZIP TITLE - 🖃 Delete ~~ - ~ TITLE = ---☐ Change Addition NAME SMITH, JEFFREY C NAME 1122 CAPITAL OF TX HIGHWAY S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **AUSTIN TX 78746** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PETERSON, MARK W NAME NAME STREET ADDRES 201 E FOURTH STREET STREET ADDRESS CITY-ST-ZIP CINCINNATI OH 45201 CITY-ST-7IP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME COLLINS, AMY NAME STREET ADDRESS 201 E 4TH STREET STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP CINCINNATI OH 45202 Delete TITLE TITLE ☐ Change Addition mas L Schilling **ELLENBERGER, RICHARD** NAME NAME 201 E FOURTH STREET E 4th Street STREET ADDRESS STREET ADDRESS CINCINNATI OH 45201 CITY-ST-7IP CITY-ST-ZIP

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

2.21-03 513.397.0373

FILED