

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005851

Entity Name: VERIZON FEDERAL INC.

FILED
Mar 04, 2009
Secretary of State

Current Principal Place of Business:

1320 N. COURT HOUSE RD
ARLINGTON, VA 22201

New Principal Place of Business:

Current Mailing Address:

1717 ARCH STREET
21ST FLOOR
PHILADELPHIA, PA 19103 US

New Mailing Address:

FEI Number: 52-1843957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: ZELENIAK, SUSAN
Address: 22001 LOUDOUN COUNTY PARKWAY
City-St-Zip: ASHBURN, VA 20147

Title: V () Delete
Name: MARCUS, VEATCH S
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: S () Delete
Name: GLENNON, VERONICA C
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: T () Delete
Name: GARRITY, JANET M
Address: 3900 WASHINGTON STREET
City-St-Zip: WILMINGTON, DE 19802

Title: VD () Delete
Name: HANLON, BRENDAN J
Address: 22001 LOUDOUN COUNTY PARKWAY
City-St-Zip: ASHBURN, VA 20147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: MATTIOLA, PAUL L
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

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

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

Title: VD (X) Change () Addition
Name: SPEAR, JONATHAN L
Address: 22001 LOUDOUN COUNTY PARKWAY
City-St-Zip: ASHBURN, VA 20147

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: PAUL L. MATTIOLA

V

03/04/2009

Electronic Signature of Signing Officer or Director

_____ Date