FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -12 AM 9:21

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # F94000025771

1. Corporation Name

ICG Access Services, Inc.

Principal Place of Business	Mailing Address
1050 - 17th Street, Suite 1610 Denver, Colorado 80265	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: May 17, 1994
3a. Date of Last Report: None

2. Principal Place of Business
21 1050-17th Street, #1610
22 Suite, Apt. #, etc.: Suite 1610
23 City & State: Denver, CO
24 Zip: 80265
25 Country: USA

2a. Mailing Address
26 same
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip:
30 Country:

4. FEI Number: 84-1261063 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired: YES! XX **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes XX No

9. Name and Address of Current Registered Agent

C T Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

10. Name and Address of New Registered Agent

81 Name: no change
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Chairman	11 TITLE	☐ Change ☐ Addition
NAME	William W. Becker	12 NAME	800001489568
STREET ADDRESS	1050 - 17th Street, Suite 1610	13 STREET ADDRESS	-05/17/95--01005--008
CITY-ST-ZIP	Denver, Colorado 80265	14 CITY-ST-ZIP	****233.75 ****233.75
TITLE	Director, President & CEO	21 TITLE	☐ Change ☐ Addition
NAME	William J. Maxwell	22 NAME	
STREET ADDRESS	1050 - 17th Street, Suite 1610	23 STREET ADDRESS	
CITY-ST-ZIP	Denver, Colorado 80265	24 CITY-ST-ZIP	
TITLE	Director and Secretary	31 TITLE	☐ Change ☐ Addition
NAME	Larry L. Becker	32 NAME	
STREET ADDRESS	1050 - 17th Street, Suite 1610	33 STREET ADDRESS	
CITY-ST-ZIP	Denver, Colorado 80265	34 CITY-ST-ZIP	
TITLE	Treasurer	41 TITLE	☑ Change ☐ Addition
NAME	John R. Evans	42 NAME	5/12/95 MB
STREET ADDRESS	1050 - 17th Street, Suite 1610	43 STREET ADDRESS	
CITY-ST-ZIP	Denver, Colorado 80265	44 CITY-ST-ZIP	
TITLE	Vice President	51 TITLE	☐ Change ☐ Addition
NAME	John A. Barnaschone	52 NAME	
STREET ADDRESS	1050 - 17th Street, Suite 1610	53 STREET ADDRESS	
CITY-ST-ZIP	Denver, Colorado 80265	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John R. Evans John R. Evans, Treasurer 5-11-95 (303) 572-2115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #