

FILED
May 19, 2001 8:00 am
Secretary of State

05-19-2001 90285 010 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002577

1. Entity Name

ICG TELECOM GROUP, INC.

Principal Place of Business

161 INVERNESS DRIVE WEST
ENGLEWOOD, CO 80112

Mailing Address

161 INVERNESS DRIVE WEST
ATTN: LEGAL DEPARTMENT
ENGLEWOOD, CO 80112

552891

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 841261063		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEANS, WILLIAM S JR. 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO RANDALL E. CURRAN 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HERBST, HARRY R. 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES., DIR. RICHARD FISH 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD TEAGUE, H. DON 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, SEC., DIR., GC BERNARD L. ZUROFF 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GC TEAGUE, H. DON 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREAS. DENNIS J. MARTIN 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MERKEL, ROBERT L 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST. SECR. ROBERT S. ALBERY 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VEGILIANTE, REGINA A 161 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-17-01 303 4067021

CR2E034 (11/00)