


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F94000005206		
1. Entity Name ACC NATIONAL LONG DISTANCE CORP.		
Principal Place of Business ONE AT&T WAY ROOM 4A235 BEDMINSTER, NJ 07921	Mailing Address ONE AT&T WAY ROOM 4A235 BEDMINSTER, NJ 07921	

FILED
06 MAY -3 PM 4: 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04262006 No Chg-P CR2E034 (11/05)

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4. FEI Number 16-1456981	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HIQ CORPORATE SERVICES, INC. 526 E. PARK AVE., #200 TALLAHASSEE, FL 32301	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO JAMES, DIONNE ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPGC DAGGER, TOM ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPRE BRAZZELL, STEPHEN 55 CORPORTE DR. BRIDGEWATER, NJ 08807
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO PETERS, KEVIN ONE AT & T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALLACH, FREDERICK K ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FEIT, ROBERT S ONE AT&T WAY BEDMINSTER, NJ 07921

8/5/9

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:  4/27/06 (908) 234-8955
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #