

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2000 8:00 am**  
**Secretary of State**

05-15-2000 90214 022 \*\*\*150.00

**DOCUMENT # F94000006318**

1. Entity Name

**BROADWING COMMUNICATIONS SERVICES INC.**

Principal Place of Business

Mailing Address

**1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746-6426  
 US**

**1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746-6426  
 US**

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

**74-2724593**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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, 2000 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PCEO  
 SCOTT, BENJAMIN  
 1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**P  
 Richard S. Pontin  
 1122 Capital of Tx Hwy. So.  
 Austin, TX 78746-6426** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**EVPC  
 GUTHRIE, JAMES F  
 1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP  
 Gordon Williams  
 1122 Capital of Tx Hwy- So.  
 Austin, TX 78746-6426** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**SVPS  
 SMITH, JEFFREY C  
 1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**S  
 Thomas E. Taylor  
 201 E. Fourth Street  
 Cincinnati, OH 45201** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPFA  
 DAWSON, BOB  
 1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**T  
 Mark W. Paterson  
 201 E. Fourth St.  
 Cincinnati, OH 45201** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPO  
 STEED, F. CLINTON  
 1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**AS  
 Angela L. Jones  
 1122 Capital of Tx Hwy- So.  
 Austin, TX 78746-6426** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPFA  
 COLUCCI, JOHN A  
 1122 CAPITAL OF TEXAS HWY S  
 AUSTIN TX 78746** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 Richard G. Ellenberger  
 201 E. Fourth St.  
 Cincinnati, OH 45201** ☒ Change ☐ 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: *Angela L. Jones*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Angela L. Jones*

Date

*4/26/00 (512) 412-4152*

Daytime Phone #

CR2E034 (9/99)