

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90033 045 ***150.00

0001306 AV

DOCUMENT # F95000005288

1. Entity Name
BELL ATLANTIC PERSONAL COMMUNICATIONS, INC.

Principal Place of Business

1717 ARCH STREET
 15TH FLOOR
 PHILADELPHIA PA 19103
 US

Mailing Address

1717 ARCH STREET
 15TH FLOOR
 PHILADELPHIA PA 19103
 US



2. Principal Place of Business

1095 AVENUE of the Americas
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

New York, NY

City & State

4. FEI Number

23-2696501

Applied For

Not Applicable

Zip

10036

Country

US

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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, 2002 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

TITLE: VCSD ☒ Delete
 NAME: HEIMANN, STEPHEN B
 STREET ADDRESS: 1717 ARCH STREET, 32ND FLOOR
 CITY-ST-ZIP: PHILADELPHIA PA 19103

TITLE: DTAS ☒ Delete
 NAME: RIDGE, GARY C
 STREET ADDRESS: 1717 ARCH ST. 29TH FLOOR
 CITY-ST-ZIP: PHILADELPHIA PA

TITLE: DC ☒ Delete
 NAME: MURPHY, DERMOTT O
 STREET ADDRESS: 1717 ARCH ST. 29TH FLOOR
 CITY-ST-ZIP: PHILADELPHIA PA 19103

TITLE: AT ☐ Delete
 NAME: KELLY, PAUL N
 STREET ADDRESS: 1717 ARCH STREET, 15TH FLOOR
 CITY-ST-ZIP: PHILADELPHIA PA 19103

TITLE: AS ☐ Delete
 NAME: GRAFTON, BARBARA E
 STREET ADDRESS: 1095 AVE. OF THE AMERICAS, ROOM 3877
 CITY-ST-ZIP: NEW YORK NY 10036

TITLE: ☐ Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P/D ☐ Change ☒ Addition
 NAME: David H. BENSON
 STREET ADDRESS: 1095 Avenue of the Americas
 CITY-ST-ZIP: New York, NY 10036

TITLE: S ☐ Change ☒ Addition
 NAME: MARIANNE DROST
 STREET ADDRESS: 1095 AVENUE of the AMERICAS
 CITY-ST-ZIP: New York, NY 10036

TITLE: V/T ☐ Change ☒ Addition
 NAME: JANET M. GARRITY
 STREET ADDRESS: 3900 Washington St., 2nd Floor
 CITY-ST-ZIP: Wilmington, DE 19802

TITLE: V ☒ Change ☐ Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: D ☐ Change ☒ Addition
 NAME: William F. HEITMANN
 STREET ADDRESS: 1095 AVENUE of the AMERICAS
 CITY-ST-ZIP: New York, NY 10036

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:

Paul N. Kelly
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul N. Kelly
 Vice President

Date

1/18/02

Daytime Phone #

215-963-6343

CR2E034 (9/01)