

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000000930

1. Entity Name

NYNEX LONG DISTANCE COMPANY

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90002 002 ***150.00

Principal Place of Business

1372 BROADWAY
8TH FLOOR
NEW YORK NY 10018
US

Mailing Address

1717 ARCH STREET
15TH FLOOR
PHILADELPHIA PA 19103
US

2. Principal Place of Business

1166 Avenue of the Americas

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
7th Floor

City & State

New York, NY

City & State

Zip

10036

Country

US

Zip

Country

4. FEI Number **13-3871399**

Applied For

Not Applicable

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, 2001 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 **PD** ☒ Delete
NAME **GRALHA, VERONICA**
STREET ADDRESS **1372 BROADWAY 8TH F1.**
CITY-ST-ZIP **NEW YORK NY 10018**

TITLE **CTS** ☒ Delete
NAME **RANNEY, WILLIAM H**
STREET ADDRESS **1320 N COURT HOUSE ROAD**
CITY-ST-ZIP **ARLINGTON VA 22201**

TITLE **T** ☐ Delete
NAME **KELLY, PAUL N**
STREET ADDRESS **1717 ARCH STREET**
CITY-ST-ZIP **PHILADELPHIA PA 19103**

TITLE **D** ☒ Delete
NAME **FARINA, JOSEPH C**
STREET ADDRESS **1095 AVENUE OF THE AMERICAS**
CITY-ST-ZIP **NEW YORK NY 10036**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/CEO** ☐ Change ☒ Addition
NAME **Steven G. McCully**
STREET ADDRESS **8300 G Guilford Road**
CITY-ST-ZIP **Columbia, MD 21046**

TITLE **CFO/T/S** ☐ Change ☒ Addition
NAME **LARRY MANION**
STREET ADDRESS **6665 N. MACARTHUR BLVD.**
CITY-ST-ZIP **IRVING, TX 75038**

TITLE **AT** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Eduardo R. Menasce**
STREET ADDRESS **1095 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10036**

TITLE **VP** ☐ Change ☒ Addition
NAME **DEBRA A. KAUFMAN**
STREET ADDRESS **1320 N. COURT HOUSE RD.**
CITY-ST-ZIP **ARLINGTON, VA 22201**

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

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

Paul N. Kelly

Date

4/17/2001

Daytime Phone #

215-963-6343

CR2E034 (10/00)