

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 21, 2007 8:00 am**  
**Secretary of State**

05-21-2007 90057 005 \*\*\*150.00

<b>DOCUMENT # F96000001908</b> 1. Entity Name <b>TTI NATIONAL, INC.</b>					
Principal Place of Business <b>22001 LOUDOUN CTY. PKWY. ASHBURN, VA 20147</b>			Mailing Address <b>TAX DEPT 8408 BLDG C2-3 512 22001 LOUDOUN CTY. PKWY. ASHBURN, VA 20147 US</b>		
2. Principal Place of Business - No P.O. Box # <b>ONE VERIZON WAY</b>		3. Mailing Address <b>ONE VERIZON WAY</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. <b>VC31E233</b>			
City & State <b>BASKING RIDGE NJ</b>		City & State <b>BASKING RIDGE NJ</b>		4. FEI Number <b>64-0874463</b>	
Zip <b>07920</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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) <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO KILLIAN, JOHN F 22001 LOUDOUN PKWY ASHBURN, VA 20147</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO ONE VERIZON WAY BASKING RIDGE NJ 07920</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V VEATCH, MARCUS 22001 LOUDOUN COUNTY PKWY. ASHBURN, VA 20147</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ONE VERIZON WAY BASKING RIDGE NJ 07920</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T FITZMIRE, ROBERT 22001 LOUDOUN COUNTY PKWY. ASHBURN, VA 20147</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>3900 WASHINGTON ST WILMINGTON DE 19802</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD MILCH, RANDAL S 22001 LOUDOUN COUNTY PKWY. ASHBURN, VA 20147</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ONE VERIZON WAY BASKING RIDGE NJ 07920</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SHAMMO, FRANCIS J 22001 LOUDOUN COUNTY PKWY. ASHBURN, VA 20147</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD ONE VERIZON WAY BASKING RIDGE NJ 07920</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition  <b>SEE ATTACHED</b>	
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.					
<b>SIGNATURE:</b> <i>Marcus R. Veatch</i>		<b>MARCUS R. VEATCH</b>		<b>4/23/07</b>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

# ATTACHMENT

40117196

TTI National, Inc.

2007 Florida For Profit Corporation Annual Report - Attachment

Document #: F96000001908

Box 11 – Additions/Changes to Officers and Directors

## Additional Officers:

Title	V
Name	Burkhardt, Charles A.
Street Address	750 Canyon Dr., 05 Floor
City-St-Zip	Coppell, TX 75019

Title	Asst Sec
Name	Marte, Susan
Street Address	22001 Loudoun County Parkway
City-St-Zip	Ashburn, VA 20147

Title	V
Name	Patota, Stephen F.
Street Address	One Verizon Way
City-St-Zip	Basking Ridge, NJ 07920

Title	Asst Sec
Name	Silliman, Craig
Street Address	Basingstoke Road
City-St-Zip	Reading, GBR RG26DA