

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F96000004572**

1. Entity Name

CUSTOMER COMMUNICATIONS CENTER, INC.

Principal Place of Business

**3011 UNIVERSITY CENTER DR
TAMPA FL 33612**

Mailing Address

**C/O FEDERATED CORPORATE SERVICES
7 WEST SEVENTH STREET
CINCINNATI OH 45202**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV KNIGHT, GERALD T 4400 BAKER RD MINNETONKA MN 55343	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Sherman, Michael P. 4400 Baker Road Minnetonka, MN 55343	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V O'BRIEN, RACHEL M 4400 BAKER RD MINNETONKA MN 55343	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tysoe, Ron W. 7 West Seventh Street Cincinnati, OH 45202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVD MICHELUTTI, PETER G 4400 BAKER RD MINNETONKA MN 55343	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Broderick, Dennis J. 7 West Seventh Street Cincinnati, OH 45202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SHERMAN, MICHAEL P 4400 BAKER RD MINNETONKA MN	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Sims, John R. 7 West Seventh Street Cincinnati, OH 45202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SZAMES, BRIAN M 4400 BAKER RD MINNETONKA MN 55343	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MANNING, JOHN C 4400 BAKER RD MINNETONKA MN 55343	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jack B. Cox

Assistant Secretary

2/19/01

513-579-7311

Date

Daytime Phone #

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90126 001 *1,650.00

04040

DO NOT WRITE IN THIS SPACE

4. FEI Number **41-1838271**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

CR2E034 (10/00)

Doc # F96 000004572
64040

Customer Communications Center, Inc.

Directors:

Dennis J. Broderick
Michael P. Sherman
Ronald W. Tysoe

7 West Seventh Street, Cincinnati, OH 45202
4400 Baker Road, Minnetonka, MN 55343
7 West Seventh Street, Cincinnati, OH 45202

Officers:

President
SVP, Oper. & Network Services
Senior VP, Chief Information Officer
VP, Chief Financial Officer
VP and Assistant Secretary
Vice President, General Counsel
Vice President
Vice President and Secretary
Vice President
Vice President
Treasurer
Assistant Treasurer
Assistant Secretary
Assistant Secretary
Assistant Secretary

Michael P. Sherman
Thomas J. Bozinski
Gary L. Bledsoe
Nils Ytterbo
Robert C. Kieffer
Dennis J. Broderick
Karen M. Hoguet
John R. Sims
Neal Glueck
Gary J. Nay
Brian M. Szames
Linda K. Paulos
Sheryl Strauss
Jack B. Cox
Klaus M. Ziermaier

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