

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90950 041 ***150.00

DOCUMENT # F96000006048

1. Entity Name

MCLEODUSA TELECOMMUNICATIONS SERVICES, INC.

Principal Place of Business

Mailing Address

**6400 C STREET SW
ATTENTION: RANDALL RINGS
CEDAR RAPIDS IA 52406
US**

**P.O. BOX 3177
ATTENTION: RANDALL RINGS
CEDAR RAPIDS IA 52406-3177
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

Cedar Rapids, Iowa

4. FEI Number

42-1407242

Applied For

Not Applicable

Zip

Country

Zip

Country

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **GRAY, STEPHEN C**
STREET ADDRESS **6400 C. ST. SW**
CITY-ST-ZIP **CEDAR RAPIDS IA 52406-3177**

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

TITLE **VPS** ☐ Delete
NAME **RINGS, RANDALL**
STREET ADDRESS **6400 C ST SW**
CITY-ST-ZIP **CEDAR RAPIDS IA 52406-3177**

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

TITLE **VPCO** ☒ Delete
NAME **PATRICK, J. LYLE**
STREET ADDRESS **6400 C ST SW**
CITY-ST-ZIP **CEDAR RAPIDS IA 52406-3177**

TITLE **COO/CFO** ☐ Change ☒ Addition
NAME **Chris A. Davis**
STREET ADDRESS **6400 C St SW**
CITY-ST-ZIP **Cedar Rapids, IA 52406-3177**

TITLE **VPT** ☐ Delete
NAME **CERYANEC, JOSEPH H**
STREET ADDRESS **6400 CS SW**
CITY-ST-ZIP **CEDAR RAPIDS IA 52406-3177**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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. Randall Rings

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/02

Date

(319) 790-6154

Daytime Phone #

CR2E034 (9/01)