2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002515

Entity Name: ADELPHIA TELECOMMUNICATIONS, INC.

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5619 DTC PKWY STE 800 GREENWOOD VILLAGE, CO 80111					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
5619 DTC F STE 800					
GREENWOOD VILLAGE, CO 80111					
FEI Number Applied For () FEI Num		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US					
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:					
Electronic Signature of Registered Agent				Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SCHLEYER, WIL 5619 DTC PKWY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COOPER, RON 5619 DTC PKWY	Oelete ' STE 800 ILLAGE, CO 80111	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	SONNENBERG, I 5619 DTC PKWY		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	WITTMAN, VANE 5619 DTC PKWY		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	ZEREFOS, JAME 5619 DTC PKWY		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	WATERMAN, KA 5619 DTC PKWY		Title: Name: Address: City-St-Zip:	()Change ()Addition	
I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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					

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES ZEREFOS

VPAS

01/06/2006