

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F97000003811 (3)  
1. Corporation Name  
NORTEL COMMUNICATIONS PERSONNEL SERVICES INC.



Principal Place of Business  
200 ATHENS WAY  
NASHVILLE TN 37228-1397

Mailing Address  
200 ATHENS WAY  
NASHVILLE TN 37228-1397

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
07/22/1997

4. FEI Number

62-1685409

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SO PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME CROSS, MARY M  
STREET ADDRESS 200 ATHENS WAY  
CITY-ST-ZIP NASHVILLE TN 37228-1397

☐ DELETE

TITLE T  
NAME ASHBY, ROBERT L  
STREET ADDRESS 200 ATHENS WAY  
CITY-ST-ZIP NASHVILLE TN 37228-1397

☐ DELETE

TITLE S  
NAME SCHECTER, ROGER A  
STREET ADDRESS 200 ATHENS WAY  
CITY-ST-ZIP NASHVILLE TN 37228-1397

☐ DELETE

TITLE AS  
NAME EGAN, LYNN C  
STREET ADDRESS 200 ATHENS WAY  
CITY-ST-ZIP NASHVILLE TN 37228-1397

☐ DELETE

TITLE D  
NAME FALETTI, RICHARD P  
STREET ADDRESS 2221 LAKESIDE BLVD.  
CITY-ST-ZIP RICHARDSON TX 75082-4399

☒ DELETE

TITLE V  
NAME COZYN, MARTIN A  
STREET ADDRESS 2221 LAKESIDE BLVD.  
CITY-ST-ZIP RICHARDSON TX 75082-4399

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Mary M. Cross*

4-15-98

(615)  
734-5170

CR2E034 (10/97)