

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 01, 1999 8:00 am  
Secretary of State

04-01-1999 90054 045 \*\*\*150.00

DOCUMENT # F97000003811

1. Corporation Name

NORTEL NETWORKS 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

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

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

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 ☐ DELETE

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

TITLE ☐ DELETE

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

TITLE ☐ DELETE

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

TITLE ☐ DELETE

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

TITLE ☐ DELETE

NAME AS  
HARKER, JR K R  
STREET ADDRESS 2221 LAKESIDE BLVD  
CITY-ST-ZIP RICHARDSON TX 75082-4399

TITLE ☐ DELETE

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

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

VP, D

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-99

Date

(615) 734-5170

Daytime Phone #

CR2E034 (11/98)

0523690