


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90086 021 ***150.00

DOCUMENT # F98000000306

1. Entity Name
BELLSOUTH MNS, INC.



Principal Place of Business: SUITE 1800, 1155 PEACHTREE ST., N.E. ATLANTA GA 30309
 Mailing Address: SUITE 1800, 1155 PEACHTREE ST., N.E. ATLANTA GA 30309



1st MOORE CR2E034 (10/04)

2. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country
 3. Mailing Address: Suite, Apt. #, etc. City & State Zip Country

4. FEI Number **58-2363753** Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE: D NAME: LEE, DONNA A STREET ADDRESS: 2180 LAKE BLVD STE 1240 CITY-ST-ZIP: ATLANTA GA 30319-6004	<input type="checkbox"/> Delete
TITLE: P NAME: KAISH, MARK STREET ADDRESS: SUITE B223 2180 LAKE BLVD NE CITY-ST-ZIP: ATLANTA GA 30319	<input type="checkbox"/> Delete
TITLE: AS NAME: IRVINE, JOYCE C STREET ADDRESS: STE 1800, 1155 PEACHTREE ST., NE CITY-ST-ZIP: ATLANTA GA 30309	<input type="checkbox"/> Delete
TITLE: VSGC NAME: KEYER, MARY K STREET ADDRESS: SUITE 12B01 2180 LAKE BLVD NE CITY-ST-ZIP: ATLANTA GA 30319	<input type="checkbox"/> Delete
TITLE: T NAME: WENTWORTH, LYNN STREET ADDRESS: 1155 PEACHTREE STREET NE STE 2006 CITY-ST-ZIP: ATLANTA GA 30309-3610	<input checked="" type="checkbox"/> Delete
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VPT NAME: Mark E. Droege STREET ADDRESS: 1155 Peachtree Street, NE, #1704 CITY-ST-ZIP: Atlanta, GA 30309-3610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joyce C. Irvine* 2/17/05 (404) 249-4450
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

F98000006306

20015478

BELLSOUTH MNS, INC.
(Business Address)

Directors

Date When Term Expires

Donna A. Lee
Suite 1240
2180 Lake Boulevard, NE
Atlanta, Georgia 30319-6004

03/28/05

Officers

Mark Kaish, President
Suite B223
2180 Lake Boulevard, NE
Atlanta, Georgia 30319-6004

03/28/05

Mary K. Keyer, Vice President, General Counsel,
External Affairs and Secretary
Suite 12B01
2180 Lake Boulevard
Atlanta, Georgia 30319-6004

03/28/05

Mark E. Droege, Vice President and Treasurer
Suite 1704
1155 Peachtree Street, NE
Atlanta, Georgia 30309-3610

03/28/05

Joyce Clower Irvine, Assistant Secretary
Suite 1800
1155 Peachtree Street, NE
Atlanta, Georgia 30309-3610

03/28/05