


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90215 007 ***150.00

DOCUMENT # F98000002356

1. Entity Name
BELLSOUTH BILLING, INC.



Principal Place of Business
**675 WEST PEACHTREE ST., #4300
ATLANTA GA 30375**

Mailing Address
**675 WEST PEACHTREE ST., #4300
ATLANTA GA 30375**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite 1800 c/o Joyce Irvine
Suite, Apt. #, etc.
1155 Peachtree Street, NE
City & State
Atlanta, GA
Zip
30309-3610

Country
USA

CHECK HERE IF MAKING CHANGES

4. FEI Number **58-2393916**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 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 NAME STREET ADDRESS CITY-ST-ZIP	D LEE, DONNA A 2180 LAKE BLVD. ATLANTA GA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREEDMAN, DEBORAH A 1155 PEACHTREE ST., #1704 ATLANTA GA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FUNDERBURG, JAN H 1155 PEACHTREE ST., #45118D3 ATLANTA GA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO HALLACY, DON G 1155 PEACHTREE ST., #1705 ATLANTA GA 30309	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOO DAWSON, GAIL 675 WEST PEACHTREE ST., N.E., #4425 ATLANTA GA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOLLETT, DAVID 600 N. 19TH STREET, #28D3 BIRMINGHAM AL	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	30345	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Suite 4511 - 675 W. Peachtree Street, NE Atlanta, GA 30375	<input checked="" 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	Suite 1061 - 1055 Lenox Park Blvd. Atlanta, GA 30319	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSGC Annamarie Lemoine Suite 4300 - 675 W. Peachtree Street, NE Atlanta, GA 30375	<input type="checkbox"/> Change <input checked="" 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 Irvine* **Joyce Irvine, Secretary** 02/11/03 404/249-4450
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Attachment Doc. # F 98060002356

90026444

BELLSOUTH BILLING, INC.
(Business Address)

DIRECTORS

Donna A. Lee
2400 Century Parkway
Atlanta, Georgia 30345

Jan H. Funderburg
Suite 4511
675 W. Peachtree Street, NE
Atlanta, Georgia 30375

Don G. Hallacy
Suite 1705
1155 Peachtree Street, NE
Atlanta, GA 30309-3610

OFFICERS

Gail N. Dawson, President
Suite 1C61
1055 Lenox Park Blvd.
Atlanta, Georgia 30319

Annamarie Lemoine, VP, Secty and General Counsel
Suite 4300
675 W. Peachtree Street, NE
Atlanta, Georgia 30375

James N. Young, Treasurer
Suite 14K07
1155 Peachtree Street, N.E.
Atlanta, Georgia 30309-3610

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