

# 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

3. Mailing Address  
**Suite 1800 c/o Joyce Irvine**

Suite, Apt. #, etc.

**1155 Peachtree Street, NE**

City & State

**Atlanta, GA 30309-3610**

Zip

**30309-3610**

Country

**USA**

City

**Atlanta, GA**

State

**GA**

Zip

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**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 **D** ☐ Delete  
NAME **LEE, DONNA A**  
STREET ADDRESS **2180 LAKE BLVD.**  
CITY-ST-ZIP **ATLANTA GA**

TITLE **D** ☒ Delete  
NAME **FREEDMAN, DEBORAH A**  
STREET ADDRESS **1155 PEACHTREE ST., #1704**  
CITY-ST-ZIP **ATLANTA GA**

TITLE **D** ☐ Delete  
NAME **FUNDERBURG, JAN H**  
STREET ADDRESS **1155 PEACHTREE ST., #45118D3**  
CITY-ST-ZIP **ATLANTA GA**

TITLE **DCEO** ☐ Delete  
NAME **HALLACY, DON G**  
STREET ADDRESS **1155 PEACHTREE ST., #1705**  
CITY-ST-ZIP **ATLANTA GA 30309**

TITLE **PCOO** ☐ Delete  
NAME **DAWSON, GAIL**  
STREET ADDRESS **675 WEST PEACHTREE ST., N.E., #4425**  
CITY-ST-ZIP **ATLANTA GA**

TITLE **V** ☒ Delete  
NAME **HOLLETT, DAVID**  
STREET ADDRESS **600 N. 19TH STREET, #28D3**  
CITY-ST-ZIP **BIRMINGHAM AL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP **30345**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **Suite 4511 - 675 W. Peachtree Street, NE**  
CITY-ST-ZIP **Atlanta, GA 30375**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **Suite 1061 - 1055 Lenox Park Blvd.**  
CITY-ST-ZIP **Atlanta, GA 30319**

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS **VPSGC**  
CITY-ST-ZIP **Annamarie Lemoine**  
**Suite 4300 - 675 W. Peachtree Street, NE**  
**Atlanta, GA 30375**

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.

Assistant

SIGNATURE: *Joyce Irvine*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Joyce Irvine, Secretary** 02/11/03 404/249-4450

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