

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003216

1. Entity Name

CENTURYTEL LONG DISTANCE, INC.

**FILED**  
**Jul 13, 2000 8:00 am**  
**Secretary of State**

07-13-2000 90030 001 \*1,100.00

Principal Place of Business

Mailing Address

100 CENTURY PARK DRIVE  
MONROE LA 71203

100 CENTURY PARK DRIVE  
MONROE LA 71203-2041

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

72-1413931

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEOP	<input type="checkbox"/> Delete
NAME	COLE, KENNETH R	
STREET ADDRESS	100 CENTURY PARK DRIVE	
CITY-ST-ZIP	MONROE LA 71203	
TITLE	VCTD	<input type="checkbox"/> Delete
NAME	EWING, R. S JR.	
STREET ADDRESS	100 CENTURY PARK DRIVE	
CITY-ST-ZIP	MONROE LA 71203	
TITLE	VAS	<input type="checkbox"/> Delete
NAME	PERRY, HARVEY SR.	
STREET ADDRESS	100 CENTURY PARK DRIVE	
CITY-ST-ZIP	MONROE LA 71203	
TITLE	S	<input type="checkbox"/> Delete
NAME	BUCHART, KAY	
STREET ADDRESS	100 CENTURY PARK DRIVE	
CITY-ST-ZIP	MONROE LA 71203	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	FOWLER, ARVIL	
STREET ADDRESS	100 CENTURY PARK DRIVE	
CITY-ST-ZIP	MONROE LA 71203	
TITLE	D	<input type="checkbox"/> Delete
NAME	POST, GLEN F III	
STREET ADDRESS	100 CENTURY PARK DRIVE	
CITY-ST-ZIP	MONROE LA 71203	

TITLE	CEO, P, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	W. Bruce Hanks	
STREET ADDRESS	100 Century Park Drive	
CITY-ST-ZIP	Monroe, LA 71203	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D, C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 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

Kay C. Buchart

7-5-2000

(318) 388-9000

Date

Daytime Phone #