2000 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 09, 2000 8:00 am Secretary of State

DOCUMENT # F9900000 1938 1. Entity Name UUNET TECHNOLOGIES, INC.				Secretary of Stat 08-09-2000 90080 021 ***550.0	
Principal Plac	e of Business LLIAMS DRIVE	Mailing Address			
FAIRFAX, VA 22031				D0076529	
	2. Principal Place of Business 3.060 WILLIAMS DRIVE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State FAIRFAX, VA		City & State		4. FEI Number Applied For 54 - 1543611 Not Applicable	
Zip 22031	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current Regis	tered Agent	1	7. Name and Address of New Registered Agent	
NRAI SE	RVICES, INC		Name	•	
526 E. PARK AVENUE TALLAHASSEE, FL 32301		Stree	Street Address (P.O. Box Number is Not Acceptable)		
				7	
			City	FL Zip Code	
8. The above	named entity submits this statement for the pur	pose of changing its registered	office or registere	ed agent, or both, in the State of Florida.	
SIGNATURE					
	Signature, typed or printed name of registered agent	and title if applicable (N	IOTE: Registered Ager	nt signature required when reinstating) DATE	
9. This corpo	ration is eligible to satisfy its Intangible	S. F. FIERRA			
Tax filing requirement and elects to do so.			all formula	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
(See criter	ria on back)			ACCOUNT SES	
11.	OFFICERS AND D	RECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	President & CEO	Delete	TITLE	Change Addition	
NAME	Robert Hartnett	1 14	NAME		
CITY - ST- ZIP	"28001 Loudon (DU	ate newy	STREET ADDRE	ESS	
	Ashburn, UA 24	7147			
TITLE	VICE PRESIDENT WALTER NAGEL	Delete	TITLE	ChangeAddition	
NAME STREET ADDRESS			NAME STREET ADDRE	798	
CITY- ST- ZIP	WASHINGTON, DC 20036		CITY- ST-ZIP	· ·	
TITLE	SECRETARY	Delete	TITLE	Change Addition	
NAME	MARTINA KNEE		NAME		
STREET ADDRESS	22001 LOUDOUN COUNTY I	PKWY.	STREET ADDRE	ess	
CITY - ST- ZIP	ASHBURN, VA 20147		CITY - ST- ZIP		
TITLE	TREASURER & CFO	Delete	TITLE	Change Addition	
NAME	MATTHEW PETZOID		NAME	MATTHOUPETZOLD	
STREET ACCRESS CITY- ST- ZIP		PKWY.	STREET ADDRE	iss	
	ASHBURN, VA 20147		_	 	
TITLE NAME	DIRECTORS JOHN SIDGMORE	Oeiete	TITLE	Change Addition	
STREET ADDRESS		KWY	STREET ADDRE	ess	
CITY- ST- ZIP	ASHBURN, VA 20147		CITY - ST- ZIP		
TITLE	DIRECTORS	Delete	TITLE	Change Addition	
NAME	MARK SPAGNOLO	2	NAME		
STREET ADDRESS		KWY.	STREET ADORES	ss	
CITY - ST- ZIP	ASHBURN, VA 20147		CITY - ST- ZIP		
OI SUDDIGIT	d to execute this report as required by Chapter	ionanire snai nave me same i	emai affacti as af mai	tion 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report ide under cath; that I am an officer or director of the corporation or the receiver or trustee is in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like	
SIGNA	TURE:		_ Wal	Her Nagel 446/60	
	SIGNATURE AND TYPED	OR DOLLTED NAME OF SICK	INC OFFICER OF	Pole Phone #	

V.P & Gen. Tax Counsel