

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 29, 2004 8:00 am**  
**Secretary of State**

04-29-2004 90342 035 \*\*\*150.00

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04092004 Chg-P CR2E034 (10/03)

<b>DOCUMENT # F99000002350</b> 1. Entity Name NORTHERN TELECOM INTERNATIONAL INC.			
Principal Place of Business 4006 E. CHAPEL NELSON HWY DURHAM, NC 27709		Mailing Address 4006 E. CHAPEL NELSON HWY DURHAM, NC 27709	
2. Principal Place of Business <b>4001 E. Chapel Hill Nelson Hwy.</b>		3. Mailing Address <b>18006 Skypark Circle</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Research Triangle Park, NC</b>		City & State <b>Irvine, CA</b>	
Zip <b>27709</b>		Zip <b>92614</b>	
Country <b>USA</b>		Country <b>USA</b>	
4. FEI Number <b>51-0266286</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD <input type="checkbox"/> Delete	NAME CROSS, MARY M	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 4001 E. Chapel Hill Nelson Hwy.
STREET ADDRESS 4006 E. CHAPEL HILL NELSON HWY	CITY-ST-ZIP DURHAM, NC 27709	STREET ADDRESS 4001 E. Chapel Hill Nelson Hwy.	CITY-ST-ZIP Research Triangle Park, NC 27709
TITLE VP <input type="checkbox"/> Delete	NAME KREBS, LAURIE A	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME 4001 E. Chapel Hill Nelson Hwy.
STREET ADDRESS 4006 E. CHAPEL HILL NELSON HWY	CITY-ST-ZIP DURHAM, NC 27709	STREET ADDRESS 4001 E. Chapel Hill Nelson Hwy.	CITY-ST-ZIP Research Triangle Park, NC 27709
TITLE T <input checked="" type="checkbox"/> Delete	NAME LESTER, MONICA L	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME _____
STREET ADDRESS 200 ATHENS WAY	CITY-ST-ZIP NASHVILLE, TN 372281397	STREET ADDRESS _____	CITY-ST-ZIP _____
TITLE AS <input type="checkbox"/> Delete	NAME EGAN, LYNN C	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME _____
STREET ADDRESS 200 ATHENS WAY	CITY-ST-ZIP NASHVILLE, TN 372281397	STREET ADDRESS _____	CITY-ST-ZIP _____
TITLE AS <input checked="" type="checkbox"/> Delete	NAME GIGLIOTTI, THOMAS A	TITLE AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Robert Looney
STREET ADDRESS 4006 E. CHAPEL HILL NELSON HWY	CITY-ST-ZIP DURHAM, NC 27709	STREET ADDRESS 200 Athens Way	CITY-ST-ZIP Nashville, TN 37228-1397
TITLE AS <input checked="" type="checkbox"/> Delete	NAME HIGGENBOTHAM, ARNEST R	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME _____
STREET ADDRESS 2221 LAKESIDE BLVD	CITY-ST-ZIP RICHARDSON, TX 750824399	STREET ADDRESS _____	CITY-ST-ZIP _____
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: <u>Laurel A. Kels</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>4/26/04</u> Daytime Phone #	

Attachment

14D145700  
# F99 00002350

Northern Telecom International, Inc.  
FEIN: 51-0266286  
List of Officers and Directors  
as of December 31, 2003

**Current Directors**

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Cross, Mary McGehee	4006 E. Chapel Hill - Nelson Hwy RTP, NC 27709
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**Current Officers**

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Name	Address
Cross, Mary McGehee President	4001 E. Chapel Hill - Nelson Hwy RTP, NC 27709
Krebs, Laurie Ann Vice-President, Tax	4001 E. Chapel Hill - Nelson Hwy RTP, NC 27709
Egan, Lynn C. Secretary	200 Athens Way Nashville, TN 37228-1397
Looney, Robert Assistant Secretary	200 Athens Way Nashville, TN 37228-1397