

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003475

FILED
Apr 27, 2009
Secretary of State

Entity Name: VERIZON INTERNATIONAL COMMUNICATIONS SERVICES INC.

Current Principal Place of Business:

ONE VERIZON WAY
ROOM VC53N168
BASKING RIDGE, NJ 07920

New Principal Place of Business:

Current Mailing Address:

ONE VERIZON WAY
ROOM VC53N168
BASKING RIDGE, NJ 07920

New Mailing Address:

FEI Number: 58-1875266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALICANDRI, RICHARD F
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: TREA () Delete
Name: FITZMORE, ROBERT F
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: VGCS () Delete
Name: HEIMANN, STEPHEN B
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: VPD () Delete
Name: BURDEN, ROBERT J
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: VPD () Delete
Name: SULLIVAN, WILLIAM T
Address: ONE VERIZON WAY
City-St-Zip: BASKING RIDGE, NJ 07920

Title: AS () Delete
Name: PERRETT, LONDA C
Address: 600 HIDDEN RIDGE
City-St-Zip: IRVING, TX 75038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM T. SULLIVAN

VPD

04/27/2009

Electronic Signature of Signing Officer or Director

Date