2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 02, 2005 8:00 am Secretary of State DOCUMENT # F9900005463 05-02-2005 90479 043 ***150.00 RCN TELECOM SERVICES, INC. Principal Place of Business Mailing Address 40073358 105 CARNEGIE CENTER 105 CARNEGIE CENTER TAX DEPARTMENT TAX DEPARTMENT PRINCETON, NJ 08540 PRINCETON, NJ 08540 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262005 CR2E034 (10/03) Cha-P 4. EEI Number City & State City & State Applied For 23-2472885 Not Applicable Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C'T'CORPORATION'SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 bile if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. CEOD President - Change X Delete TITLE TITLE Peter Aguin o NAME MCCOURT, DAVID NAME 196 Van Buren St STREET ADDRESS 105 CARNIGIE CENTER STREET ADDRESS PRINCETON, NJ 08540 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition HOGAN, PATRICK NAME STREET ADDRESS STREET ADDRESS 105 CARNEGNE CENTER CITY-ST-ZIP CITY-ST-ZIP PRINCETON, NJ 08540 TITLE 🔀 Delete TITLE ☐ Change Addition MCCOURT, DAVID C NAME 179 STONEY BROOK ROAD STREET ADDRESS STREET ADDRESS HOPEWELL, NJ 08525 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE Addition SAILE, JAMES J NAME NAME STREET ADDRESS 2126 WIATHROP ROAD STREET ADDRESS HUNTINGDON VALLEY, PA 19006 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition WINGFIELD, TERRY NAME NAME 175 RIVER RD. STREET ADDRESS STREET ADDRESS GREAT FALLS, VA 53018 CITY-ST-ZIP ☐ Delete TITLE ☐ Change TITLE ■ Addition NAME NAME STREET ADDRESS 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 paradicless, with all plate like empowered.

ED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED