FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G93024

Mailing Address

AT&T WIRELESS SERVICES OF FLORIDA, INC.

	FILE.	D
Jul 31	1997	8:00am
Secr	etary (of State

1 (884) 11 BB (8 1848)	i stati Chiim (1		0 (DI

5000 CARILLOI KIRKLAND WA		5000 CARILLON POINT KIRKLAND WA 98033-7356	3						
				3. Date Incorporated or Qualified 03/26/1984		n. Date of Last Report 06/20/1996			
· '	lace of Business	2a. Mailing Address			4. FEt Number		Applied	d For	
21		26			91-1256097			plicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		3.75 Additi Fee Require		
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Added to Fe		
Zip 24	Country 25	Zip 29	Count	ry	This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agen	ŧ		
THE	PRENTICE-HALL CORPORATION	SYSTEM INC.	8	1 Name	and the result of the second o				
	1 HAYS STREET		8	2 Street A	Street Address (P.O. Box Number is Not Acceptable)				
	TE 105								
TAL	LAHASSEE FL 32301		8	3					
			8	4 City		FL 85	Zip Code	3	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	tes, the abo	ve-named o	corporation submits this statement for the p	urpose of char	l nging its reg	istered	
office or r agent. La	egistered agent, or both, in the State i m familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, Fl	aulhorized orida Statut	by the corp es	oration's board of directors. I hereby accep	t the appointm	ent as regis	stered	
SIGNATURE									
	Signature, typed or printed name of registered age:	·		gont signature i	required when reinstating)	DATE			
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC			12 Addition	
TITLE	HOOPER, STEVEN W.	ן טנננונ	1.1 TiTle		PAD Paniel R. Hesse		hange []	i Audilion	
NAME	5000 CARILLON POINT		1.2 NAM		5000 Calillon Point	L			
STREET ADDRESS CITY-ST-ZIP	KIRKLAND WA 98033-7397		1.3 SINE		3000	₹			
TITLE	S	DELETE	2.1 1(1)		- 42 - 4 - 4 4 4 4		hange 🔲	Addition	
NAME	PERRY, WAYNE M.		2.2 NAM	E	avegory P. Landis,	71			
STREET ADDRESS	5000 CARILLON POINT		2.3 STRE	ET ADDRESS	Evegory P. Landis 5000 Caillon Point				
CITY-ST-ZIP	KIRKLAND WA 98033-7397		2 4 0(1)	'- ST - ZIP	Mrkland, WA 98033				
TITLE	VP	DELETE	3.1 Till				Change 🔲	Addition	
NAME	THOMAS, MASK U.		3.2 NAM	E					
STREET ADDRESS	5000 CARILLON POINT		3.3 STRE	ET ADDRESS					
CITY-ST-ZIP	KIRKLAND WA 98033-7397		3.4. CITY	'- ST- 2IP					
TITLE	VPAS	☐ DELETE	4.1 THILE				hange 🔲	Addition	
NAME	MARSH, JENNIFER		4. 2 NAA						
STREET ADDRESS	5000 CARILLON POINT			ET ADDRESS					
CITY-ST-ZIP	KIRKLAND WA 98033-7397	DELETE	4.4 CITY		2-20		Change 🔲	Addition	
TITLE NAME	CFOT HUFF, ROLLA P.	() DETERE	5.1 TITLI 5.2 NAM	; r	afor 0	X	nonge 🔲) Addition	
STREET ADDRESS	5000 CARILLON POINT			ET ADDRESS	John Dithompson 5000 Carllon Point				
CITY-ST-ZIP	KIRKLAND WA 98033-7397		- 6	- SI - ZIP	Kirkland, WH 98033				
TITLE	SVPD	☐ DELETE	6.1 TiTLE		FIREIGNA, WITT		hange	Addition	
NAME	QUARTNER, ANDREW A.		6.2 NAM				, ,		
STREET ADDRESS	5000 CARILLON POINT			ET ADDRESS					
CITY-ST-ZIP	KIRKLAND WA 98033-7397		. I	- SI - 7(P					

14. I do 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 annual report or supplemental annual 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 12 or Block 12 if changed or on an attachment with an address.