2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M9900001488

1. Entity Name

LUCENT CONSUMER COMMUNICATIONS, LLC



FILED
Jan 22, 2003 8:00 am
Secretary of State
01-22-2003 90083 005 ****50.00

Principal Place of Business Mailing Address **ヘヘエハミエの** 600/700 MOUNTAIN AVENUE 800 NORTH POINT PARKWAY RM. 83N 350A MURRAY HILL NJ 07974 ALPHARETTA GA 30005 2. Principal Place of Business 3. Mailing Address 800 North Point Porkway Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Room 83N 380F City & State City & State 4. FEI Number Applied For 22-3536332 HlphareHa Ga Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired us 30005 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) See A Hacked FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State List Due By May 1, 2003 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM TITLE President ☐ Addition ☐ Delete TITLE DICZOK, PAUL NAME NAME STREET ADDRESS 600/700 MOUNTAIN AVENUE STREET ADDRESS CITY-ST-ZIP MURRAY HILL NJ 07974 CITY-ST-ZIP MGRM SIAN Change TITI F ☐ Addition TITLE ☐ Delete KEEFE, MICHAEL NAME NAME 600/700 MOUNTAIN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MURRAY HILL NJ 07974 CITY-ST-ZIP MGRM 26 Change Addition ☐ Delete TITLE TITLE PRITCHETT, TERRY NAME NAME 600/700 MOUNTAIN AVENUE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP MURRAY HILL NJ 07974 MGRM **VP+T** Change ☐ Addition TITLE ☐ Delete TITLE GIBBENS, MARK NAME NAME 600/700 MOUNTAIN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIF MURRAY HILL NJ 07974 CITY-ST-ZIP MGRM ЯΥ Change ☐ Addition Delete TITLE TITLE ANDRULONIS, GREGORY NAME NAME STREET ADDRESS 600/700 MOUNTAIN AVENUE STREET ADDRESS CITY-ST-ZIP **MURRAY HILL NJ 07974** CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE SABIA-CAHILL, KATHLEEN NAME NAME 600-700 MOUNTAIN AVE. STREET ADDRESS STREET ADDRESS CITY-ST-7IP MURRAY HILL NJ 07974-0636 CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall be ve the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute ... is report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE REGURNERY Pritch ett SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1/1/03

770 750 4410

Daytime Phone #

E083 (10/02)

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