


50.00

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # M99000001522</b> 1. Entity Name AT&T GLOBAL NETWORK SERVICES LLC	
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Principal Place of Business ONE AT&T WAY BEDMINSTER, NJ 07921	Mailing Address ONE AT&T WAY BEDMINSTER, NJ 07921
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DO NOT WRITE IN THIS SPACE

FILED  
06 MAY -3 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04262006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 22-3646053	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

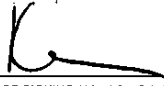
9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARACH, D ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOLAN, PAUL ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS PESTER, DAVID ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BROWN, THOMAS ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DUAH, ANTOINETTE A ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS METZGER, KATHLEEN S ONE AT&T WAY BEDMINSTER, NJ 07921

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have 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 this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  4/27/06 (908) 234-8955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #