

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 25 1997 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **P00421 (8)**
1. Corporation Name
NATIONAL EXCHANGE CARRIER ASSOCIATION INC.



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|--|---|
| Principal Place of Business 100 S JEFFERSON ROAD WHIPPANY NJ 07981 | Mailing Address 100 S JEFFERSON ROAD WHIPPANY NJ 07981-1027 |
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|--------------------------------|---------|---------------------|---------|---|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 12/28/1983 | 3a. Date of Last Report 06/12/1996 |
| 21 | | 26 | | 4. FEI Number 22-2484310 | Applied For Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 22 | | 27 | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| City & State | | City & State | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 23 | | 28 | | | |
| Zip | Country | Zip | Country | | |
| 24 | | 29 | | | |

| | | | |
|--|--|---|----------------|
| 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 | | 10. Name and Address of New Registered Agent | |
| | | 81 Name | |
| | | 82 Street Address (P.O. Box Number is Not Acceptable) | |
| | | 83 | |
| | | 84 City | FL 85 Zip Code |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

| | | | |
|----------------------------|-------------------------------------|---|---|
| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PD <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BALDWIN, BRUCE W. | 1.2 NAME | |
| STREET ADDRESS | 534 CHERRY TREE TERRACE | 1.3 STREET ADDRESS | <i>See Attached List</i> |
| CITY-ST-ZIP | KINNELON NJ | 1.4 CITY-ST-ZIP | |
| TITLE | VPD <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GREIG, JOHN A. | 2.2 NAME | |
| STREET ADDRESS | 62 DESP DALE DRIVE | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | BERKELEY NJ | 2.4 CITY-ST-ZIP | |
| TITLE | VPD <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | STERN, WILLIAM E. | 3.2 NAME | |
| STREET ADDRESS | 23 CRANE ROAD | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | MOUNTAIN LAKES NJ | 3.4 CITY-ST-ZIP | |
| TITLE | TD <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | COOK, RONALD E. | 4.2 NAME | |
| STREET ADDRESS | 4 HICKORY PLACE | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | CEDAR KNOLLS NJ | 4.4 CITY-ST-ZIP | |
| TITLE | SD <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HOYLE, DAVID F. | 5.2 NAME | |
| STREET ADDRESS | 25 HICKORY PL #G14 | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | CHATHAM NJ | 5.4 CITY-ST-ZIP | |
| TITLE | VPD <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LEVY, KENNETH A. | 6.2 NAME | |
| STREET ADDRESS | 25 OUTLOOK PLACE | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | GLEN RIDGE NJ | 6.4 CITY-ST-ZIP | |

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **3/20/97**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **0076714**

CR2E037 (9/96)

National Exchange Carrier Association
1997 Board of Directors

Gerry Anderson
General Manager
Mid-Rivers Telephone
P.O. Box 280
106 Second Avenue South
Circle, MT 59215

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Pres. Public Service Telephone
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(104 Winston Street) *

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Century Telephone Enterprises, Inc.
P.O. Box 4065
Monroe, Louisiana 71211

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Roseau, MN 56751

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Niceville, FL 32578

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P.O. Box 228
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(318 Third Avenue W.)

William W. Magruder
General Manager
Duo County Telephone Coop.
P.O. Box 80
Jamestown, KY 42629
(Highway 127 South)

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Pacific Bell
140 New Montgomery St., Room 1814
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(19066 Market Street) *

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General Manager
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(100 Main Street) *

Jacob J. Goldberg
Vice President - Wholesale Markets
NYNEX
1095 Avenue of the Americas - Room 4043
New York, NY 10036

Nels J. Smith
P.O. Box 708
Sundance, WY 82729-0708
(1717 Highway 585)*

Robert E. Stoffels
5018 Sandpiper Lane South
St. Petersburg, FL 33771

Michael D. Campbell
Executive Vice President & CFO
Roseville Telephone Company
P.O. Box 969
Roseville, CA 95678
(211 Lincoln Street)

* Use street address rather than P.O. Box # when sending material via express mail.