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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 29, 1999 8:00 am  
Secretary of State

03-29-1999 90005 032 \*\*\*150.00

DOCUMENT # P00917

1. Corporation Name  
AT&T SOUTHEAST INC.

Principal Place of Business

ROOM S-287  
412 MT. KEMBLE AVE.  
MORRISTOWN NJ 07960  
US

Mailing Address

ROOM S-287  
412 MT. KEMBLE AVE.  
MORRISTOWN NJ 07960  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1984

4. FEI Number

13-3182731

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH 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 607.0502 and 607.1508, 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 607.0505, 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

TITLE PCEO ☐ DELETE

NAME BRECHER, EPHRAIM M  
STREET ADDRESS 412 MT. KEMBLE AVENUE, ROOM S267  
CITY-ST-ZIP MORRISTOWN NJ 07962-1995

TITLE VP ☐ DELETE

NAME KILPATRIC, JIM G  
STREET ADDRESS 295 NORTH MAPLE AVENUE, ROOM #3263D2  
CITY-ST-ZIP BASKING RIDGE NJ 07920-1002

TITLE VPS ☐ DELETE

NAME FEIT, ROBERT S  
STREET ADDRESS 131 MORRISTOWN RD. BLDG. A ROOM A2035  
CITY-ST-ZIP BASKING RIDGE NJ 07920-1002

TITLE T ☐ DELETE

NAME DWYER, EDWARD M  
STREET ADDRESS 295 N. MAPLE AVE.  
CITY-ST-ZIP BASKING RIDGE NJ 07920

TITLE AS ☐ DELETE

NAME DUAH, ANTOINETTE A  
STREET ADDRESS 412 MT. KEMBLE AVENUE RM. S287  
CITY-ST-ZIP MORRISTOWN NJ 07960

TITLE AS ☐ DELETE

NAME LINK, BRIDGETTE  
STREET ADDRESS 412 MT. KEMBLE AVE. RM. C252  
CITY-ST-ZIP MORRISTOWN NJ 07960

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Antoinette A. Duah 3/16/99

Date

Daytime Phone #

973-644-1224

CR2E034 (11/98)

**AT&T SOUTHEAST, INC.**

Election Date 01/14/1999 FEIN 13-3182731

**ELECTED CORPORATION OFFICERS AND DIRECTORS****TITLE / NAME****BUSINESS ADDRESS**500-800917  
267099-90005-32**OFFICERS**

<b>President/CEO</b> Ephraim M. Brecher	412 Mt. Kemble Avenue, PO Box 1995 Room S267 Morristown, NJ 07962-1995
<b>Vice President</b> Steven Garfinkel	295 N. Maple Avenue Room 1211N3 Basking Ridge, NJ 07920-1002
<b>Vice President</b> John W. Thomson	295 N. Maple Avenue Basking Ridge, NJ 07920
<b>Vice President &amp; Secretary</b> Robert S. Feit	131 Morristown Rd. Bldg.A Rm.A2035 Basking Ridge, NJ 07920-1002
<b>Vice President - Real Estate</b> George M. Foss	150 Mt. Airy Road Basking Ridge, NJ 07920
<b>Treasurer</b> Edward M. Dwyer	295 N. Maple Ave Basking Ridge, NJ 07920
<b>Assistant Secretary - Tax</b> Antoinette A. Duah	412 Mt. Kemble Avenue Room S287 Morristown, NJ 07960
<b>Assistant Secretary - Tax</b> Jeff Tutnauer	412 Mt. Kemble Avenue Room C250 Morristown, NJ 07960
<b>Assistant Secretary - Tax</b> Gary Wiggins	412 Mt. Kemble Ave. Room S209 Morristown, NJ 07960

**DIRECTORS**

<b>Director</b> Robert S. Feit	131 Morristown Rd. Bldg.A Rm.A2035 Basking Ridge, NJ 07920-1002
<b>Director</b> Steven Garfinkel	295 N. Maple Avenue Room 1211N3 Basking Ridge, NJ 07920-1002
<b>Director</b> John W. Thomson	295 N. Maple Avenue Basking Ridge, NJ 07920