

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90009 022 \*\*\*550.00

<b>DOCUMENT #</b> P00917			
1. Entity Name <span style="float:right">✓</span>			
AT&T SOUTHEAST INC.			
Principal Place of Business		Mailing Address	
412 MT. KEMBLE AVE. ROOM S287 MORRISTOWN, NJ 07960		412 MT. KEMBLE AVE. ROOM S287 MORRISTOWN, NJ 07960	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 13-3182731		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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:			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	
		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
<b>11. OFFICERS AND DIRECTORS</b>		<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCEO BRECHER, EPHRAIM M 412 MT. KEMBLE AVENUE, ROOM S267 MORRISTOWN NJ 07962-1995 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEE ATTACHED LIST <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP KILPATRIC, JIM G 295 N. MAPLE AVE, ROOM 33263D2 BASKING RIDGE NJ 07920-1002 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS FEIT, ROBERT S 131 MORRISTOWN RD. BLDG. A ROOM A2035 BASKING RIDGE NJ 07920-1002 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DWYER, EDWARD M 295 N. MAPLE AVE. BASKING RIDGE NJ 07920 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS DUAH, ANTOINETTE A 412 MT. KEMBLE AVENUE RM. S287 MORRISTOWN NJ 07960 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS LINK, BRIDGETTE 412 MT. KEMBLE AVE. RM. C252 MORRISTOWN NJ 07960 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Antoinette A. Duah</i>		ANTOINETTE A. DUAH	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 5/3/00 Daytime Phone # 973-644-1224	

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**AT&T SOUTHEAST, INC.**  
Election Date 05/01/1999 FEIN 13-3182731

**ELECTED CORPORATION OFFICERS AND DIRECTORS**

**TITLE / NAME**

**BUSINESS ADDRESS**

**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