2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02331

1. Entity Name
VERIZON DIRECTORIES CORP.

FILED
02 JAN 16 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2200 WEST AIRFIELD DRIVE DALLAS/FT WORTH AIRPORT TX 75261-9810 US	TAX DEPARTMANT P.O. BOX 619810 DALLAS/FT WORTH AIRPORT TX 75261-9810 US

2. Principal Place of Business		3. Mailing Address	
		Attn: Legal Dept.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-3254412 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $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 S. PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ☐ Delete HARLESS, KATHERINE J 2200 W AIRFIELD DR - POB 619810 DALLAS FT WORTH AIRPORT TX 75261-9810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 900004785199--4 -01/18/02--01072--001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ☐ Delete MUNDY, WILLIAM G 2200 W AIRFIELD DR - POB 619810 DALLAS FT WORTH AIRPORT TX 75261-9810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	****150.00 ****150.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPFD ☐ Delete SCHOENBERGER, DAVID 2200 W AIRFIELD DR - POB 619810 DALLAS FT WORTH AIRPORT TX 75261-9810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ☐ Delete DUNN, BRIAN E 2200 W AIRFIELD DR - POB 619810 DALLAS FT WORTH AIRPORT TX 75261-9810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ☐ Delete WACHENDORFER, ALLISON 2200 W AIRFIELD DR - POB 619810 DALLAS FT WORTH AIRPORT TX 75261-9810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 1178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ☒ Delete TISCIONE, THOMAS N 2200 W AIRFIELD DR - POB 619810 DALLAS FT WORTH AIRPORT TX 75261-9810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: SIGNATURE OF OFFICER OR DIRECTOR _____ Date 972-453-7000 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Allison Wachendorfer Secretary

CR2E034 (9/01)

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