

✓ **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**May 14 1997 8:00am**  
**Secretary of State**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P03331 (6)**

1. Corporation Name  
**GTE TELECOM INCORPORATED**



Principal Place of Business

**77TH A-STREET  
NEEDHAM MA 21954  
US**

Mailing Address

**1500 CONFERENCE CENTER DRIVE  
ATTN: TAX DEPT  
CHANTILLY VA 22021  
US**

3. Date Incorporated or Qualified <b>09/11/1984</b>	3a. Date of Last Report <b>05/01/1996</b>
4. FEI Number <b>16-1226981</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 **77 A Street**

Suite, Apt. #, etc.

22 City & State

23 **Needham MA**

Zip

24 **02194**

Country

25 **US**

2a. Mailing Address

26 **15000 Conference Center Drive**

Suite, Apt. #, etc.

27 **Attn: Tax Department**

City & State

28 **Chantilly VA**

Zip

29 **20151**

Country

30 **US**

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 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DUANE, THOMAS B.</b>	1.2 NAME	<b>SEE ATTACHED</b>
STREET ADDRESS	<b>201 NORTH FRANKLIN STE 700</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>TAMPA FL</b>	1.4 CITY - ST - ZIP	
TITLE	AT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>AMIS, DAVID</b>	2.2 NAME	
STREET ADDRESS	<b>201 NORTH FRANKLIN SUITE 700</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>TAMPA FL</b>	2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**James V. Martin Assistant Treasurer**

**4/30/97 703-818-4448**

Date

Daytime Phone #

CR2E034 (9/96)

## **GTE TELECOM, INCORPORATED**

### **Directors**

Francis A. Gicca	77 "A" Street Needham, MA 02194
David B. Monaghan, Jr.	77 "A" Street Needham, MA 02194
A. Frederick Susi	77 "A" Street Needham, MA 02194

### **Officers**

Francis A. Gicca	President	77 "A" Street Needham, MA 02194
Thomas B. Duane	Vice President	201 N. Franklin St., Ste. 700 Tampa, FL 33602
Gene A. Talley	Vice President	201 N. Franklin St., Ste. 700 Tampa, FL 33602
David B. Monaghan, Jr.	Vice President-Finance	77 "A" Street Needham, MA 02194
Gail M. King	Vice President-General Counsel	77 "A" Street Needham, MA 02194
Marianne Drost	Secretary	One Stamford Forum Stamford CT 06904
Kevin T. Gammons	Assistant Secretary	77 "A" Street Needham, MA 02194
Bruce L. Whited	Controller & Treasurer	77 "A" Street Needham, MA 02194
David H. Amis	Assistant Treasurer	201 N. Franklin St., Ste. 700 Tampa, FL 33602
James L. Martin	Assistant Treasurer	15000 Conference Center Dr. Chantilly, VA 20151