FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 FEB 22 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500001412905
-02/23/95--01010--001
****200.00 ****200.00

DOCUMENT # **P14223** **(2)**

1. Corporation Name
BELLSOUTH ADVANCED NETWORKS, INC.

Principal Place of Business	Mailing Address
675 W. PEACHTREE ST. STE. 4300 ATLANTA GA 30375 US	675 W. PEACHTREE ST. STE. 4300 ATLANTA GA 30375 US

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **04/29/1987**
3a. Date of Last Report: **07/29/1994**
4. FEI Number: **58-1720501** ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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	PD	1.1 TITLE PD	Fredrick K. Shaftman ☒ Change ☒ Addition
NAME	~~BULLEIT, D.A.~~	1.2 NAME	
STREET ADDRESS	~~4100 JOHNSON FERRY RD~~	1.3 STREET ADDRESS	1936 Blue Hills Dr.
CITY-ST-ZIP	~~ATLANTA GA~~	1.4 CITY-ST-ZIP	Roanoke, VA 24012
TITLE	D	2.1 TITLE D	Douglas A. Bulleit ☒ Change ☐ Addition
NAME	~~COWEN, JOHN R.~~	2.2 NAME	
STREET ADDRESS	~~4155 PEACHTREE ST.~~	2.3 STREET ADDRESS	Suite 200, 1100 Ashwood Pkwy.
CITY-ST-ZIP	~~ATLANTA GA~~	2.4 CITY-ST-ZIP	Atlanta, GA 30338
TITLE	T	3.1 TITLE D	Robert L. Capell, III ☐ Change ☒ Addition
NAME	~~MCARTHUR, R.W.~~	3.2 NAME	
STREET ADDRESS	~~1400 PEACHTREE ST.~~	3.3 STREET ADDRESS	Suite 4507, 675 W. Peachtree St.
CITY-ST-ZIP	~~ATLANTA GA~~	3.4 CITY-ST-ZIP	Atlanta, GA 30375
TITLE	S	4.1 TITLE D	Phil S. Jacobs ☐ Change ☒ Addition
NAME	STENHOUSE, SCOTT D.	4.2 NAME	
STREET ADDRESS	1100 PEACHTREE ST.	4.3 STREET ADDRESS	Suite 4511, 675 W. Peachtree St.
CITY-ST-ZIP	ATLANTA GA	4.4 CITY-ST-ZIP	Atlanta, GA 30375
TITLE	D	5.1 TITLE D	James A. Schenk ☐ Change ☒ Addition
NAME	~~OGDEN, JR., T.D.~~	5.2 NAME	
STREET ADDRESS	~~2-1200, 3000 RIVERCHASE~~	5.3 STREET ADDRESS	Suite 1250, 3000 Riverchase Galleria
CITY-ST-ZIP	~~BIRMINGHAM AL~~	5.4 CITY-ST-ZIP	Birmingham, AL 35244
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	~~HANKEL, MICHAEL K.~~	6.2 NAME	
STREET ADDRESS	~~1400 PEACHTREE ST., N.E.~~	6.3 STREET ADDRESS	
CITY-ST-ZIP	~~ATLANTA GA~~	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: D. Scott Stenhouse 2/15/95 404-529-5605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0398750 FF