2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14895

City-St-Zip:

VP T

Title:

Name:

Address:

City-St-Zip:

ATLANTA, GA 303093610 US

175 E. HOUSTON STREET

SAN ANTONIO, TX 78205 US

KLUB, JONATHAN P

() Delete

Entity Name: BELLSOUTH BUSINESS SYSTEMS, INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1155 PEACHTREE ST NE ROOM 16D ATLANTA, GA 303093610 US				675 WEST PEACHTREE ST NW SUITE 4200 ATLANTA, GA 30375 US		
Current Mailing Address:				New Mailing Address:		
ROOM 16D 1155 PEACHTREE STREET, NE ATLANTA, GA 303093610 US				675 WEST PEACHTREE ST NW SUITE 4200 ATLANTA, GA 30375 US		
FEI Number:	58-1682668	FEI Number Applied For ()	FEI Nur	mber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US						
The above in the State		ubmits this statement for the pu	ırpose c	of changing i	ts registered of	office or registered agent, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VPGC (X) I GILL, LAWRENC 2180 LAKE BLVI ATLANTA, GA 30	D., #12B01		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	JACOBS, PHIL S	CHTREE STREET, STE 4516		Title: Name: Address: City-St-Zip:	IRWIN, JOHN	ACHTREE STREET, STE 4516
Title: Name: Address:	BROWN, RONNI	Delete E L : PEACHTREE ST. NE		Title: Name: Address:	ROBINSON, JO	() Change()Addition OHN R ACHTREE ST NW. #13C

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

ATLANTA, GA 30375 US

() Change () Addition

SIGNATURE: LYNN ALEXANDER DTAX 04/23/2008