


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P16957 1. Entity Name VERIZON AIRFONE INC.	
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Principal Place of Business 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522-9000 US	Mailing Address 2809 BUTTERFIELD ROAD OAK BROOK, IL 60521
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DO NOT WRITE IN THIS SPACE



01282004 No Chg-P CR2E034 (10/03)

4. FEI Number 36-3166957	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UN00000070067 03/01/04-80031-023 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PALLONE, WILLIAM E 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS KALISZ, RONALD J 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS BEMBENEK, LAURA 2809 BUTTERFIELD ROAD OAK BROOK, IL 60522
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DROST, MARIANNE 1095 AVENUE OF THE AMERICAS NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T GARRITY, JANET M 3900 WASHINGTON ST. WILMINGTON, DE 19802
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, and all other like and empowered.

SIGNATURE: <u>Ronald J. Kalisz</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date: <u>2/11/04</u>	Daytime Phone #: <u>630-575-1235</u>
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