


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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P17919 (2) 1. Corporation Name MCCAW RCC COMMUNICATIONS, INC.					
Principal Place of Business 5000 CARILLON POINT KIRKLAND WA 98033			Mailing Address 5000 CARILLON POINT KIRKLAND WA 98033		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/05/1988	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 91-1199104	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No N/A	
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81	Name <i>Change of agent form submitted by</i>
				82	Street Address (P.O. Box Number is Not Acceptable) <i>CT Corporation System</i>
				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 _____ (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
TITLE	P/D	<input type="checkbox"/> DELETE			
NAME	HESSE, DANIEL R				
STREET ADDRESS	5000 CARILLON POINT				
CITY-ST-ZIP	KIRKLAND WA				
TITLE	S	<input type="checkbox"/> DELETE			
NAME	LANDIS, GREGORY P				
STREET ADDRESS	5000 CARILLON POINT				
CITY-ST-ZIP	KIRKLAND WA				
TITLE	VP	<input type="checkbox"/> DELETE			
NAME	THOMAS, MARK U.				
STREET ADDRESS	5000 CARILLON POINT				
CITY-ST-ZIP	KIRKLAND WA 98033				
TITLE	VPAS	<input type="checkbox"/> DELETE			
NAME	MARSH, JENNIFER				
STREET ADDRESS	5000 CARILLON POINT				
CITY-ST-ZIP	KIRKLAND WA 98033				
TITLE	CFOT	<input type="checkbox"/> DELETE			
NAME	THOMPSON, JOHN D				
STREET ADDRESS	5000 CARILLON POINT				
CITY-ST-ZIP	KIRKLAND WA				
TITLE	SVPD	<input checked="" type="checkbox"/> DELETE			
NAME	QUARTNER, ANDREW A.				
STREET ADDRESS	5000 CARILLON POINT				
CITY-ST-ZIP	KIRKLAND WA 98033				
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME		S/D			
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME		VPI CFO/T/D			
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					

SIGNATURE: _____

April 22, 1998 (425)822-4500

CR2E034 (10/97)