2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23464

Entity Name: ITC^DELTACOM COMMUNICATIONS INC

FILED Feb 20, 2006 Secretary of State

The BLETACOM COMMONICATIONS, INC.				
Current Principal Place of Business:			New Princ	ipal Place of Business:
SUITE 400	MADISON PIKE LE, AL 35806	: US		
Current Mailing Address:			New Mailir	ng Address:
ourient maining Address.			New Main	ng Address.
7037 OLD MADISON PIKE SUITE 400 HUNTSVILLE, AL 35806 US				
FEI Number:	63-0832070	FEI Number Applied For ()	El Number Not Appli	icable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
1201 HAYS	ATION SERVICE S STREET SSEE, FL 3230			
The above in the State		ubmits this statement for the purpo	ose of changing it	ts registered office or registered agent, or both,
SIGNATUR	RE.			
01014/ (101		Signature of Registered Agent		 Date
Election Can	npaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS: AD			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PLUNKETT, SAR	SON PIKE, SUITE 400	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition PLUNKETT, SARA L 7037 OLD MADISON PIKE, SUITE 400 HUNTSVILLE, AL 35806
Title: Name: Address: City-St-Zip:	MULLIS, THOMA	SON PIKE, SUITE 400	Title: Name: Address: City-St-Zip:	SEC (X) Change () Addition MULLIS, THOMAS 7037 OLD MADISON PIKE, SUITE 400 HUNTSVILLE, AL 35806
Title: Name: Address: City-St-Zip:	WILLIAMS, LARI	SON PIKE, SUITE 400	Title: Name: Address: City-St-Zip:	CEO (X) Change () Addition CURRAN, RANDALL 7037 OLD MADISON PIKE, SUITE 400 HUNTSVILLE, AL 35806
Title: Name: Address: City-St-Zip:	WALKER, ANDR	SON PIKE, SUITE 400	Title: Name: Address: City-St-Zip:	CFO (X) Change () Addition FISH, RICHARD 7037 OLD MADISON PIKE, SUITE 400 HUNTSVILLE, AL 35806
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition SWANI, SANJAY 320 PARK AVENUE, SUITE 2500 NEW YORK, NY 10022
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition MCINERNEY, THOMAS E 320 PARK AVENUE, SUITE 2500 NEW YORK, NY 10022

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: SARA PLUNKETT VP 02/20/2006