2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091365

EMLING, CHARLES

3300 N. PACE BLVD

3300 N. PACE BLVD

PENSACOLA, FL 32505

MILLER, MARK

EVPE

PENSACOLA, FL 32505

(X) Delete

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED Mar 27, 2006 Secretary of State

Entity Nai	me: NETWO	RK TELEPHONE CO	ORPORATION				
Current Principal Place of Business:				New Principal Place of Business:			
3300 N. PA PENSACC	ACE BLVD DLA, FL 32505	S US					
Current Mailing Address:				New Mailing Address:			
3300 N. PA PENSACC	ACE BLVD DLA, FL 32505	5 US					
FEI Number:	: 59-3477521	FEI Number Applied	l For () FEI N	umber Not Appl	icable ()	Certificate of Status Desi	red ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	DANIEL R DMANA ST., S DLA, FL 32501						
	named entity of Florida.	submits this stateme	ent for the purpose	of changing i	ts registered	l office or registered agen	t, or both,
SIGNATU	RE:						
	Electro	nic Signature of Reg	istered Agent			Date	
Election Car	npaign Financin	g Trust Fund Contribut	ion ().				
OFFICER	S AND DIREC	TORS:		ADDITION	S/CHANGE	S TO OFFICERS AND D	IRECTORS:
Title: Name: Address: City-St-Zip:	CEO (RUSSENBERG 3300 N. PACE PENSACOLA,	BLVD		Title: Name: Address: City-St-Zip:	CEO CYR, LEO 3300 N. PAC PENSACOLA		
Title: Name: Address: City-St-Zip:	CFO (KENNEDY, DA 3300 N. PACE PENSACOLA,	BLVD		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	COO (CYR, LEO 3300 N. PACE PENSACOLA,			Title: Name: Address: City-St-Zip:	CAO EMLING, CH 3300 N. PAC PENSACOLA	E BLVD	
Title:	CAO () Delete		Title:	EVPE	(X) Change () Addition	

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

MILLER, MARK

3300 N. PACE BLVD

PENSACOLA, FL 32505

() Change () Addition

SIGNATURE: DANYELLE KENNEDY-LANTZ CONT 03/27/2006