2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91485 004 ***150.00

DOCUMENT # F01000005962

1. Entity Name
BELL ATLANTIC INVESTMENT DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Address
1095 AVENUE OF THE AMERICAS. ROOM 3875 NEW YORK NY 10036	1095 AVENUE OF THE AMERICAS. ROOM 3875 NEW YORK NY 10036

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-2405898 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CONT ALICANDRI, RICHARD F 1095 AVENUE OF THE AMERICAS, ROOM 3875 NEW YORK NY 10036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARISH, ROBERT J. 1095 AVENUE OF THE AMERICAS, 40TH FLOOR-ROOM 4037 NEW YORK, NY 10036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ERB, ROBERT W 1095 AVENUE OF THE AMERICAS, ROOM 3875 NEW YORK NY 10036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEITMANN, WILLIAM F. 1095 AVENUE OF THE AMERICAS, ROOM 3913 NEW YORK, NY 10036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT GARRITY, JANET M 3900 WASHINGTON AVE., 2ND FLOOR WILMINGTON DE 19802	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Marcus R. Veatch 1095 Avenue of the Americas, 31st Floor New York, NY 10036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS GRAFTON, BARBARA E 1717 ARCH STREET, 30TH FLOOR PHILADELPHIA PA 19103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Richard P. Jankun 1095 Avenue of the Americas, Room 3104 New York, NY 10036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT KELLY, PAUL N 1717 ARCH STREET, 30TH FLOOR PHILADELPHIA PA 19103	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD MCQUAID, EDWARD J 1095 AVENUE OF THE AMERICAS, ROOM 3875 NEW YORK NY 10036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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, with all other like empowered.

SIGNATURE: Marcus R. Veatch SIGNATURE REQUIRED 4/16/03 212-395-1712
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #