

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90131 048 \*\*\*150.00

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DOCUMENT # F95000005288

1. Corporation Name

BELL ATLANTIC PERSONAL COMMUNICATIONS, INC.

Principal Place of Business

1717 ARCH ST 29TH FL  
PHILADELPHIA PA 19103  
US

Mailing Address

1717 ARCH ST 32ND FL  
30TH FLOOR  
PHILADELPHIA PA 19103  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1995

4. FEI Number

23-2696501

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 1717 Arch Street

2a. Mailing Address

26 1717 Arch St

Suite, Apt. #, etc.

22 15th Fl

Suite, Apt. #, etc.

27 15th Fl

City & State

23 Phila., PA

City & State

28 Phila., PA

Zip

24 19103

Country

Zip

29 19103

Country

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DVS ☐ DELETE

NAME HEIMANN, STEPHEN B  
STREET ADDRESS 1717 ARCH ST. 48TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA

TITLE DTAS ☐ DELETE

NAME RIDGE, GARY C  
STREET ADDRESS 1717 ARCH ST. 29TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA

TITLE DC ☐ DELETE

NAME MURPHY, DERMOTT O  
STREET ADDRESS 1717 ARCH ST. 29TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103

TITLE AT ☐ DELETE

NAME KELLY, PAUL N  
STREET ADDRESS 1717 ARCH ST. 30TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103

TITLE AS ☐ DELETE

NAME GRAFTON, BARBARA E  
STREET ADDRESS 1717 ARCH ST. 32ND FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP General Counsel, Sec. of Director ☒ Change ☐ Addition

1.2 NAME Stephen B. Heimann  
1.3 STREET ADDRESS 1717 Arch St., 32nd Fl.  
1.4 CITY-ST-ZIP Phila., PA 19103

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE Assistant Treasurer ☒ Change ☐ Addition

4.2 NAME Paul N. Kelly  
4.3 STREET ADDRESS 1717 Arch St., 15th Fl  
4.4 CITY-ST-ZIP Phila., PA 19103

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul N. Kelly

Date

Daytime Phone #

CR2E034 (11/98)