

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000005893

**Entity Name:** FAIRPOINT CARRIER SERVICES, INC.**Current Principal Place of Business:**521 E. MOREHEAD  
STE 500  
CHARLOTTE, NC 28202**Current Mailing Address:**908 W. FRONTVIEW  
DODGE CITY, KS 67801**FEI Number:** 62-1729497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	CEO
Name	SUNU, PAUL H
Address	521 E. MOREHEAD, STE 500
City-State-Zip:	CHARLOTTE NC 28202

Title	SRVP
Name	HOOD, LISA R
Address	908 W. FRONTVIEW
City-State-Zip:	DODGE CITY KS 67801

Title	EVPS
Name	LINN, SHIRLEY J
Address	521 E. MOREHEAD, STE 500
City-State-Zip:	CHARLOTTE NC 28202

Title	CFO
Name	SABHERWAL, AJAY
Address	521 E. MOREHEAD, STE 500
City-State-Zip:	CHARLOTTE NC 28202

Title	P
Name	NIXON, PETER G
Address	521 E. MOREHEAD, STE 500
City-State-Zip:	CHARLOTTE NC 28202

I hereby 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 all other like empowered.

**SIGNATURE:** LISA R HOOD

SRVP

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date