

2017 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 SOWELL, SUSAN L
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

Title VICE PRESIDENT AND TREASURER
Name JAKUBOWSKI, KATHERINE
Address 521 E. MOREHEAD
STE 500
City-State-Zip: CHARLOTTE NC 28202

Title SENIOR VP AND CORPORATE
CONTROLLER
Name HOGSHIRE, JOHN T.
Address 521 E. MOREHEAD
STE 500
City-State-Zip: CHARLOTTE NC 28202

Title SENIOR VP, ASSISTANT SECRETARY
AND ASSISTANT GENERAL COUNSEL
Name SOWELL, SUSAN L.
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

SR VP

03/18/2017

Electronic Signature of Signing Officer/Director Detail

Date