


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #P02386
 1. Entity Name
VERIZON DIRECTORIES SALES - WEST INC.



FILED

06 JAN 12 PM 2:43


SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business
**2200 W AIRFIELD DRIVE
 DALLAS/FORT WORTH AIRPORT, TX 75261-9810**

Mailing Address
**ATTN: LEGAL DEPT.
 2200 W. AIRFIELD DR., P.O. BOX 619810
 DALLAS/FORT WORTH AIRPORT, TX 75261** US

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

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



61052006 Chg-P CR2E034 (11/05)

4. FEI Number
36-3254411 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

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	PD HARLESS, KATHERINE J 2200 W AIRFIELD DRIVE, P.O. BOX 619810 DALLAS/FORT WORTH AIRPORT, TX 752619810 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300064414328 01/25/06--01003--019 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MUNDY, WILLIAM G 2200 W AIRFIELD DRIVE DALLAS/FORT WORTH AIRPORT, TX 752619810 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VFPD COTICCHIO, ANDREW 2200 WEST AIRFIELD DRIVE, P.O. BX 619810 DALLAS, TX 752619810 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD MCDONALD, JOHN J 2200 WEST AIRFIELD DRIVE, P.O. BX 619810 DALLAS-FT WORTH, TX 752619810 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O OLSON, NEIL D 2200 WEST AIRFIELD DRIVE, P.O. BX 619810 DALLAS-FT. WORTH, TX 752619810 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SKOGEN, SANDRA L 2200 W AIRFIELD DRIVE DALLAS/FORT WORTH AIRPORT, TX 752619810 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 life empowered.

SIGNATURE: Sandra L Skogen **1/9/06** **972-453-7160**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Sandra L. Skogen, Secretary