

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P02386**

1. Entity Name

VERIZON DIRECTORIES SALES CORP.

FILED

02 JAN 16 PM 6:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**2200 W AIRFIELD DRIVE
DALLAS TX 75261-9810**

Mailing Address

**TAX-DEPT. Legal Dept.
P.O. BOX 619810
DALLAS TX 75261-9810**

2. Principal Place of Business

3. Mailing Address

Legal Dept.

Suite, Apt. #, etc.

P.O. Box 619810

Suite, Apt. #, etc.

City & State

DFW Airport, TX

City & State

DFW Airport, TX 75261

4. FEI Number

36-3254411

Applied For

Not Applicable

Zip

Country

Zip

Country

75261

USA

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

**CT CORPORATION SYSTEM
1200 S. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **VPGM**
STREET ADDRESS **MCDONALD, JOHN J**
CITY-ST-ZIP **2200 WEST AIRFIELD DRIVE, P.O. BX 619810
DALLAS TX 75261-9810**

TITLE Change Addition
NAME **VPGM/D**
STREET ADDRESS **DFW Airport, TX**
CITY-ST-ZIP

TITLE Delete
NAME **VPGM**
STREET ADDRESS **NEAL, MARILYN B**
CITY-ST-ZIP **2200 WEST AIRFIELD DRIVE, P.O. BX 619810
DALLAS TX 75261-9810**

TITLE Change Addition
NAME **Secretary**
STREET ADDRESS **Allison Wachendorfer**
CITY-ST-ZIP **2200 West Airfield Drive
Dallas, Tx 75261-9810**

TITLE Delete
NAME **VPF**
STREET ADDRESS **SCHOENBERGER, DAVID**
CITY-ST-ZIP **2200 WEST AIRFIELD DRIVE, P.O. BX 619810
DALLAS TX 75261-9810**

TITLE Change Addition
NAME **000004792400--6**
STREET ADDRESS **-01/23/02--01080--005**
CITY-ST-ZIP *****150.00 ***150.00**

TITLE Delete
NAME **VPS**
STREET ADDRESS **MANSBRIDGE, MICHAEL**
CITY-ST-ZIP **2200 WEST AIRFIELD DRIVE, P.O. BX 619810
DALLAS TX 75261-9810**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **VPS**
STREET ADDRESS **BLOCHER, CAROL**
CITY-ST-ZIP **2200 WEST AIRFIELD DRIVE, P.O. BX 619810
DALLAS TX 75261-9810**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **VPS**
STREET ADDRESS **HRSKA, SCOTT B**
CITY-ST-ZIP **2200 WEST AIRFIELD DRIVE, P.O. BX 619810
DALLAS TX 75261-9810**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

S. Allison Wachendorfer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/02
Date

972-453-7000
Daytime Phone #