



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

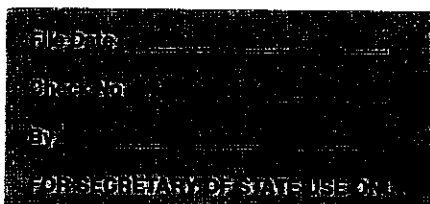
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>25482</u>		2. Exact name of the Corporation <u>Nortel Networks Inc.</u>			
3. Principal office address <u>4001 E. Chapel Hill Nelson Hwy</u>		City <u>Research Triangle Park</u>		State <u>NC</u>	Zip <u>27709</u>
4. Business Phone No. <u>919-905-2721</u>		5. State of Incorporation <u>DE</u>			
6. Brief description of the character of business conducted in Rhode Island <u>Limited to wind down activities.</u>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT					
President Name <u>Timothy C. Ross</u>			Vice-President Name <u>Allen K. Stout</u>		
Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>			Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>		
City <u>Research Triangle Park</u>	State <u>NC</u>	Zip <u>27709</u>	City <u>Research Triangle Park</u>	State <u>NC</u>	Zip <u>27709</u>
Secretary Name <u>Timothy C. Ross</u>			Treasurer Name <u>John Ray</u>		
Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>			Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>		
City <u>Research Triangle Park</u>	State <u>NC</u>	Zip <u>27709</u>	City <u>Research Triangle Park</u>	State <u>NC</u>	Zip <u>27709</u>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT					
Director Name <u>Timothy C. Ross</u>			Director Name		
Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>			Street Address		
City <u>Research Triangle Park</u>	State <u>NC</u>	Zip <u>27709</u>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of Instruction sheet.					
10. SHARES ISSUED (X) BOX FOR ATTACHMENT					
NUMBER OF SHARES <u>99</u>		CLASS/SERIES <u>Common</u>		PAR VALUE <u>\$100</u>	

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Timothy C. Ross 2/13/13
Signature of Authorized Representative Date

Timothy C. Ross, Secretary
Print or Type Name of Authorized Representative

BY 71230838