



**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>116352</u>		2. Exact name of the Corporation <u>Northern Telecom International 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>							
<b>7. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT</b>							
President Name		Vice-President Name <u>Allen K. Stout</u>					
Street Address		Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>					
City	State	Zip	City	State	Zip		
<u>Research Triangle Park</u>	<u>NC</u>	<u>27709</u>	<u>Research Triangle Park</u>	<u>NC</u>	<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	State	Zip	City	State	Zip		
<u>Research Triangle Park</u>	<u>NC</u>	<u>27709</u>	<u>Research Triangle Park</u>	<u>NC</u>	<u>27709</u>		
<b>8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT</b>							
Director Name <u>Timothy C. Ross</u>		Director Name					
Street Address <u>4001 E. Chapel Hill Nelson Hwy</u>		Street Address					
City	State	Zip	City	State	Zip		
<u>Research Triangle Park</u>	<u>NC</u>	<u>27709</u>					
Director Name		Director Name					
Street Address		Street Address					
City	State	Zip	City	State	Zip		
<b>9. SHARES AUTHORIZED</b>					<b>10. SHARES ISSUED (X) BOX FOR ATTACHMENT</b>		
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.					NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
					<u>100</u>	<u>Common</u>	<u>NONE</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.

FILED  
BY  
FOR SECRETARY OF STATE USE ONLY

FILED

FEB 21 2013

Form No. 630  
Revised: 01/2012

BY 76230839

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.

Signature of Authorized Representative

Date

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