2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE:

Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90054 010 ****50.00 DOCUMENT # L06000116832 CVA NORTH CABLE, LLC 60043867 Principal Place of Business Mailing Address 1001 EAST TELECOM DRIVE 1001 EAST TELECOM DRIVE BOCA RATON, FL 33431 BOCA RATON, FL 33431 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02202007 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 20-8307512 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code FL 8. The above named entity stabmits 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE Make check payable to Filing Fee is \$50.00 Due by May 1, 2007 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGR Addition TITLE ☐ Delete TITLE Change Holshouser Lesse A 1001 East Tolecom Dm Boca Raton & 33431 Change NAME SILVER, LARRY D NAME STREET ADDRESS 1001 EAST TELECOM DRIVE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33431 CITY-ST-ZIP CEO ☐ Delete TITLE Addition TITLE NAME SILVER, LARRY D NAME STREET ADDRESS 1001 EAST TELECOM DRIVE STREET ADDRESS BOCA RATON, FL 33431 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Channe Addition MINNIEAR, EDWARD O JR. NAME NAME 1001 EAST TELECOM DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7/P BOCA RATON, FL 33431 CITY-ST-ZIP ☐ Defete ☐ Change ☐ Addition TITLE MINNIEAR, EDWARD O JR. NAME NAME 1001 EAST TELECOM DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33431 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED