

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000576

FILED
Apr 15, 2009
Secretary of State

Entity Name: USCARRIER TELECOM, LLC

Current Principal Place of Business:

180 INTERSTATE NORTH PARKWAY, SUITE 200
ATLANTA, GA 30339

New Principal Place of Business:

Current Mailing Address:

180 INTERSTATE NORTH PARKWAY, SUITE 200
ATLANTA, GA 30339

New Mailing Address:

FEI Number: 58-2325043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AMERICAN FIBER SYSTEMS
Address: % DAVE DANCAK 100 MERIDIAN CTRSTE 250
City-St-Zip: ROCHESTER, NY 14818

Title: MGR () Delete
Name: SOLOMON, TEDDY
Address: 101 MERCER STREET
City-St-Zip: ALMA, GA 31510

Title: MGR () Delete
Name: BRANTLEY TELEPHONE COMPANY, INC.
Address: 112 E CLEVELAND STREET
City-St-Zip: NAHUNTA, GA 31553

Title: MGR () Delete
Name: BULLOCH CELLULAR, INC.
Address: 601 NORTHSIDE DRIVE WEST
City-St-Zip: STATESBORO, GA 30458

Title: MGR () Delete
Name: CITIZENS TELEPHONE COMPANY, INC.
Address: 134 N BAILEY AVENUE
City-St-Zip: LESLIE, GA 31764

Title: MGR () Delete
Name: COASTAL COMMUNICATIONS, INC.
Address: 100 RYON AVENUE 31310
City-St-Zip: HINESVILLE, GA 30136

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: SHERYL KILGORE

CTR

04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date