


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A27520	
1. Entity Name SPRINT COMMUNICATIONS COMPANY LIMITED PARTNERSHIP	

SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 08 APR 15 AM 11:47

Principal Place of Business 6500 SPRINT PARKWAY OVERLAND PARK, KS 66251-5777	Mailing Address 6500 SPRINT PARKWAY HL-5ASTX OVERLAND PARK, KS 66251-5777
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2. Principal Place of Business - No P.O. Box # <i>6500 Sprint Pkwy</i> Suite, Apt. #, etc. <i>HL-5A STX</i> City & State <i>Overland Park, KS</i> Zip <i>66251-5777</i> Country <i>USA</i>	3. Mailing Address <i>SAME</i> Suite, Apt. #, etc. City & State Zip Country
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04072008	Chg-LP	CR2E003 (12/06)
4. FEI Number 43-1408007	Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent THE PRENTICE HALL CORPORATION SYSTEM, INC. 110 N. MAGNOLIA STREET TALLAHASSEE, FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>1201 Halp Street</i> City <i>Tallahassee</i> FL Zip Code <i>32301</i>
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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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P09124
NAME	US TELECOM, INC.
STREET ADDRESS	6500 SPRINT PARKWAY
CITY-ST-ZIP	OVERLAND PARK, KS 662515777
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	500123501095
CITY-ST-ZIP	04/15/08--01010--004 **500.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Doree Barbara* 4/11/08 913-315-5800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #