

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001841

**FILED**  
**Apr 20, 2005**  
**Secretary of State**

**Entity Name:** NET COMMUNICATIONS, LLC

**Current Principal Place of Business:**

614 GRAND HIGHWAY  
CLERMONT, FL 34711

**New Principal Place of Business:**

1650 SUMMIT LAKE DRIVE  
SUITE 101-A  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

614 GRAND HIGHWAY  
CLERMONT, FL 34711

**New Mailing Address:**

1650 SUMMIT LAKE DRIVE  
SUITE 101-A  
TALLAHASSEE, FL 32317

FEI Number: 59-3629329

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOHNSON, JULIA L  
614 GRAND HWY  
CLERMONT, FL 34711 US

**Name and Address of New Registered Agent:**

JOHNSON, JULIA L  
5169 LATROBE DRIVE  
WINDEMERE, FL 34786 US

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: \_\_\_\_\_

04/20/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: JOHNSON, JULIA L  
Address: 614 GRAND HIGHWAY  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: JOHNSON, JULIA L  
Address: 5169 LATROBE DRIVE  
City-St-Zip: WINDERMERE, FL 34786

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIA L. JOHNSON

MS.

04/20/2005

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