

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004633

FILED
Apr 29, 2005
Secretary of State

Entity Name: FREEDOM PHONE SERVICES, LLC

Current Principal Place of Business:

300 HICKORY AVE.
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

300 HICKORY AVE.
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 59-3647507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RODAMER, KATHLEEN
300 HICKORY AVE
MERRITT ISLAND, FL 32953 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/MEMBERS:

Title: MGR () Delete
Name: HAHN, DONNA M
Address: 300 HICKORY AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: MGR () Delete
Name: RODAMER, KATHLEEN
Address: 300 HICKORY AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: MGR () Delete
Name: DAVID, DAVID
Address: 300 HICKORY AVENUE
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
Address:
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 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: KATHLEEN RODAMER

MGR

04/29/2005

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