

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000010122

FILED
Apr 29, 2003
Secretary of State

Entity Name: TELECOM ANALYSIS SOFTWARE, LLC

Current Principal Place of Business:

7120 STAFFORD ROAD
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

7120 STAFFORD ROAD
DOVER, FL 33527

New Mailing Address:

FEI Number: 01-0689658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBBINS, MICHAEL H
101 EAST KENNEDY BLVD., SUITE 280
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

CORNWELL, LARRY C MGR
7120 STAFFORD ROAD
DOVER, FL 33527 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: LARRY C. CORNWELL 04/29/2003

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CORNWELL, LARRY C MGR
Address: 7120 STAFFORD ROAD
City-St-Zip: DOVER, FL 33527 US

Title: MGR () Change (X) Addition
Name: CORNWELL, JUDY W MGR
Address: 7120 STAFFORD ROAD
City-St-Zip: DOVER, FL 33527 US

Title: MGR () Change (X) Addition
Name: BALEVRE, PHILIP E MGR
Address: 14401 RICH BRANCH ROAD
City-St-Zip: GAITHERSBURG, MD US

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: LARRY C. CORNWELL MGR 04/29/2003

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