

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Feb 01, 2008  
Secretary of State**

DOCUMENT# L02000021520

Entity Name: CYBERTV, LLC

**Current Principal Place of Business:**

4081-C LB MCLEOD RD  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2184  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 55-0792935      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOOOPER, CLIFFORD D  
4081-C LB MCLEOD RD  
ORLANDO, FL 32811    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: MGRM ( ) Delete  
Name: HOOPER, DWIGHT  
Address: 5841 MEDINAH WAY  
City-St-Zip: ORLANDO, FL 32819

Title: MGRM ( ) Delete  
Name: HOOPER, CALEB  
Address: 5841 MEDINAH WAY  
City-St-Zip: ORLANDO, FL 32819

Title: MGRM ( ) Delete  
Name: HOOPER, DWIGHT JR.  
Address: 5841 MEDINAH WAY  
City-St-Zip: ORLANDO, FL 32819

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

**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:

Title: VP ( ) Change (X) Addition  
Name: HOOPER, CLIFFORD E  
Address: 9042 SHAWN PARK PLACE  
City-St-Zip: ORLANDO, FL 32819

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: CLIFFORD D. HOOPER

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02/01/2008

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