

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031678

Entity Name: ANDERSON TELECOM, LLC

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

1254 OKEECHOBEE ROAD
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1254 OKEECHOBEE ROAD
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 35-2189934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURDICK, GEOFFREY C
1110 NORTH OLIVE AVE.
WEST PALM BEACH, FL 33401 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: MGR () Delete
Name: ANDERSON, JAMES
Address: 1254 OKEECHOBEE ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: SANCHEZ, RORY V MR
Address: 1254 OKEECHOBEE ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: HOCHMUTH, ROBERT A
Address: 1254 OKEECHOBEE ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ANDERSON, JAMES L
Address: 1254 OKEECHOBEE ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

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 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: JAMES L ANDERSON

MGR

01/09/2008

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