

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000014045

FILED  
Jul 23, 2004  
Secretary of State

Entity Name: REYOX COMMUNICATIONS, LLC

## Current Principal Place of Business:

669 SEABROOK PARKWAY  
JACKSONVILLE, FL 32211 US

## New Principal Place of Business:

## Current Mailing Address:

669 SEABROOK PARKWAY  
JACKSONVILLE, FL 32211 US

## New Mailing Address:

FEI Number: 20-0010399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, LISA J  
669 SEABROOK PARKWAY  
JACKSONVILLE, FL 32211 US

## Name and Address of New Registered Agent:

SHANKS, JAMES A  
669 SEABROOK PARKWAY  
JACKSONVILLE, FL 32211 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: JAMES A SHANKS

07/23/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: SHANKS, JAMES A III  
Address: 669 SEABROOK PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGRM ( ) Delete  
Name: THOMAS, LISA J  
Address: 669 SEABROOK PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32211 US

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

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

## ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition  
Name: SAEED, ASHAR T  
Address: 669 SEABROOK PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGRM ( ) Change (X) Addition  
Name: RUHNKE, ROMAN J  
Address: 669 SEABROOK PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: MGR ( ) Change (X) Addition  
Name: THOMAS, LISA J  
Address: 669 SEABROOK PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32211 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: JAMES A SHANKS

MGRM

07/23/2004

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