

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021261

FILED
Mar 03, 2009
Secretary of State

Entity Name: INTEGRATED CABLE SOLUTIONS LLC

Current Principal Place of Business:

5905 JOHNS ROAD
SUITE 101
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

5905 JOHNS ROAD
SUITE 101
TAMPA, FL 33634

New Mailing Address:

FEI Number: 20-0033924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILL, ROBERT S
6601 TIMBER BROOK COURT
TAMPA, FL 33625 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: DILL, ROBERT S
Address: 6601 TIMBER BROOK COURT
City-St-Zip: TAMPA, FL 33625

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: MGR () Change (X) Addition
Name: DILL, KAREN M
Address: 6601 TIMBER BROOK COURT
City-St-Zip: TAMPA, FL 33625

Title: MGR () Change (X) Addition
Name: BERGFELD, PAUL R
Address: 6515 YELLOWHAMMER AVE
City-St-Zip: TAMPA, FL 33625

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: PAUL R. BERGFELD

MGR

03/03/2009

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