

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031218

FILED
Apr 24, 2008
Secretary of State

Entity Name: PCS ATLANTIC STATES LLC

Current Principal Place of Business:

1200 RIVERPLACE BLVD
800
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

PO BOX 1351
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 37-1473280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, JOHN
1200 RIVERPLACE BLVD #800
JACKSONVILLE, FL 32207 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: CEO () Delete
Name: SMITH, BRIAN J
Address: 1200 RIVERPLACE BLVD #800
City-St-Zip: JACKSONVILLE, FL 32207

Title: P () Delete
Name: LEWIS, BRANDON
Address: 1200 RIVERPLACE BLVD #800
City-St-Zip: JACKSONVILLE, FL 32207

Title: CFO () Delete
Name: CHONG, KYLE
Address: 1200 RIVERPLACE BLVD #800
City-St-Zip: JACKSONVILLE, FL 32207

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:

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: BRIAN SMITH

CEO

04/24/2008

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