
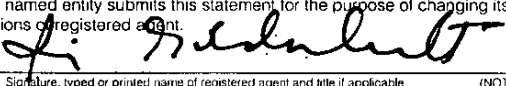



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90420 004 ****50.00

DOCUMENT # L03000032610					
1. Entity Name ORLANDO WIRELESS, LLC					
Principal Place of Business ORLANDO INTERNATIONAL AIRPORT NORTH TERMINAL COMPLEX # 7 WELLINGTON, FL			Mailing Address P.O. BOX 210457 WELLINGTON, FL 33421		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-0190309	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GOLDSCHMIDT, IRIS 1591 WILTSHIRE VILLAGE WELLINGTON, FL 33414-8982			7. Name and Address of New Registered Agent		
			Name Iris Goldschmidt		
			Street Address (P.O. Box Number is Not Acceptable) 3141 Fairlane Farms Road		
			Unit 8		
			City Wellington		FL
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 			Iris Goldschmidt		
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BERMAN, ILENE P.O. BOX 210457 WELLINGTON, FL 33421	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 			Ilene Berman		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		
			Daytime Phone #		

20010697



02102006 Chg-LLC CR2E083 (11/05)

Applied For
Not Applicable

ATTACHMENT
20010697
MILLER, TURETSKY, RULE & McLENNAN

MARK D. TURETSKY
JOHN A. RULE
KEITH B. McLENNAN *
KELLY C. WALL *

* ALSO MEMBER OF NEW JERSEY BAR

A Professional Corporation
ATTORNEYS AT LAW

3770 RIDGE PIKE, SECOND FLOOR
COLLEGEVILLE, PENNSYLVANIA 19426

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(610) 489-1157 Facsimile

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MITCHELL W. MILLER
Of Counsel

JILL K. ANDERSON, J.D.
Legal Assistant

Sender's E-mail Address:
Mcalkins@millerturetsky.com

February 20, 2006

Florida Department of State
Division of Corporations
P O Box 6478
Tallahassee, FL 32314

RE: Orlando Wireless, LLC
Document No. L03000032610

Dear Sir/Ms:

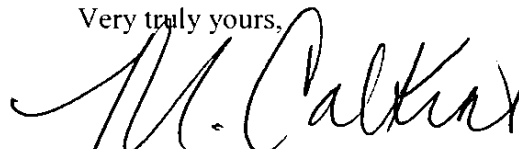
Enclosed please find my client's completed 2006 Limited Liability Company Annual Report.

In addition, I have enclosed my firm's check made payable to the Florida Department of State in the amount of \$50.00 to cover the cost of filing this report.

Please call me if you have any questions or require anything further.

Thank you for your assistance.

Very truly yours,



Michelle A. Calkins
Paralegal to Keith B. McLennan

MAC:mac

pc: Orlando Wireless, LLC

Enclosures