2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2005
Secretary of State

DOCUMENT# L03000046601

Entity Name: THOMPSON CABLE SERVICES, LLC

Current Principal Place of Business:

472 WILDFOX DRIVE
CASSELBERRY, FL 32707

New Principal Place of Business:

1104 POINTE NEWPORT TERRACE
APT. 200
CASSELBERRY, FL 32707

Current Mailing Address:

472 WILDFOX DRIVE
CASSELBERRY, FL 32707

New Mailing Address:

1104 POINTE NEWPORT TERRACE
APT. 200
CASSELBERRY, FL 32707

FEI Number: 20-0418793 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMPSON, LESMORE C
472 WILDFOX DRIVE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

THOMPSON, LESMORE C
1104 POINTE NEWPORT TERRACE
APT. 200
CASSELBERRY, FL 32707 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: _____ 03/17/2005
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: THOMPSON, LESMORE C
Address: 472 WILDFOX DRIVE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: THOMPSON, LESMORE C
Address: 1104 POINTE NEWPORT TERRACE APT. 200
City-St-Zip: CASSELBERRY, FL 32707

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: LESMORE C. THOMPSON MGRM 03/17/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date