

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084430

FILED  
May 01, 2006  
Secretary of State

Entity Name: DATACOM SOLUTIONS, LLC

**Current Principal Place of Business:**

P.O. BOX 132  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 132  
WILDWOOD, FL 34785

**New Mailing Address:**

FEI Number: 72-1595708      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SIMPSON, TROY E  
2533 EAST COUNTY ROAD 466  
WILDWOOD, FL 34785      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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SIMPSON, TROY E  
Address: P.O. BOX 132  
City-St-Zip: WILDWOOD, FL 34785 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TROY SIMPSON

MR.

05/01/2006

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