

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000380

Entity Name: BASCOM DIGITAL LLC

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

16015 ARBOR VIEW WAY
SUITE 222
NAPLES, FL 34110 US

New Principal Place of Business:

9531 BROADWAY AVE EAST
ESTERO, FL 33928 US

Current Mailing Address:

16015 ARBOR VIEW WAY
SUITE 222
NAPLES, FL 34110 US

New Mailing Address:

PO BOX 595
ESTERO, FL 33928 US

FEI Number: 20-2342204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEWBERRY, LARRY RAY
5042 GROVELAND TER
NAPLES, FL 341198429 US

Name and Address of New Registered Agent:

NEWBERRY, LARRY RAY
9531 BROADWAY AVE. EAST
ESTERO, FL 33928 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:

01/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NEWBERRY, LARRY RAY
Address: 5042 GROVELAND TER
City-St-Zip: NAPLES, FL 341198429

Title: MGRM (X) Delete
Name: NEWBERRY, RICHARD
Address: 5042 GROVELAND TER
City-St-Zip: NAPLES, FL 341198429

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NEWBERRY, LARRY RAY
Address: 9531 BROADWAY AVE EAST
City-St-Zip: ESTERO, FL 33928 US

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: LARRY RAY NEWBERRY

MGRM

01/05/2006

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