

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003884

FILED  
Mar 23, 2007  
Secretary of State

Entity Name: SKYBASE COMMUNICATIONS LLC

## Current Principal Place of Business:

2419 FLEISCHMANN ROAD  
SUITE 4  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

2419 FLEISCHMANN ROAD  
SUITE 4  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 20-2156045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD, #221E  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

FORESMAN, BRIDGETTE  
2419 FLEISCHMANN ROAD  
SUITE 4  
TALLAHASSEE, FL 32308 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: BRIDGETTE FORESMAN

03/23/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FORSMAN, BURTON J  
Address: 2419 FLEISCHMANN ROAD #4  
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR ( ) Delete  
Name: HILL, JON A  
Address: 2419 FLEISCHMANN ROAD #4  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES:

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 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: BURTON J FORSMAN

MGR

03/23/2007

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