2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 07, 2006
Secretary of State

DOCUMENT# L05000061538

Entity Name: TALK 2 ME WIRELESS, LLC

Current Principal Place of Business:

9033 ASTER RD
FORT MYERS, FL 33912

New Principal Place of Business:

18070 S. TAMIAMI TRAIL
STE. 11
FORT MYERS, FL 33908

Current Mailing Address:

9033 ASTER RD
FORT MYERS, FL 33912

New Mailing Address:

18070 S. TAMIAMI TRAIL
STE. 11
FORT MYERS, FL 33908

FEI Number: 20-3025855 **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:

FRYLING, MARC W
14891 STERLING OAKS DR
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

FRYLING, MARC W
18070 S. TAMIAMI TRAIL
STE. 11
FORT MYERS, FL 33908 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: _____ 07/07/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: FRYLING, MARC W
Address: 14891 STERLING OAKS DR
City-St-Zip: NAPLES, FL 34110

Title: MGRM ( ) Delete
Name: KNAPP, ERIC S
Address: 9033 ASTER RD
City-St-Zip: FORT MYERS, FL 33912

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: ERIC S. KNAPP MGRM 07/07/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date