

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90324 025 ****55.00

DOCUMENT # L06000009722

1. Entity Name
IN-TOUCH COMMUNICATIONS PENINSULA II, LLC



Principal Place of Business
**321 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441**

Mailing Address
**321 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01302007

Chg-LLC

CR2E083 (12/06)

4. FEI Number
20-4230468

Applied For
Not Applicable

5. Certificate of Status Desired ☒ X

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STOTZER, THEODORE R
321 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

10. ADDITIONS/CHANGES

TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MGRM/P
STREET ADDRESS	Brian Street
CITY - ST - ZIP	321 East Hillsboro Blvd. Deerfield Beach, FL 33441
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V
STREET ADDRESS	James H. Cohen
CITY - ST - ZIP	321 East Hillsboro Blvd. Deerfield Beach, FL 33441
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 registered trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

IN-TOUCH COMMUNICATIONS PENINSULA II, LLC

SIGNATURE: By: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

March 8, 2007

(954) 949-3480

Date

Daytime Phone #