

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019868

Entity Name: EXETER COMMUNICATIONS LLC

FILED
Feb 07, 2007
Secretary of State

Current Principal Place of Business:

210 BANBURY COURT
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

375 DOUGLAS AVE., #1002
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

210 BANBURY COURT
LONGWOOD, FL 32779

FEI Number: 20-2383787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JORDAN, ROBERT
210 BANBURY COURT
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

JORDAN, ROBERT T
210 BANBURY COURT
LONGWOOD, FL 32779 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: ROBERT T.JORDAN

02/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JORDAN, ROBERT
Address: 210 BANBURY COURT
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: PHILPOTT, DONALD R
Address: 2105 FALKNER ROAD
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JORDAN, ROBERT T
Address: 210 BANBURY COURT
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM (X) Change () Addition
Name: COX-JORDAN, IBERT M
Address: 210 BANBURY COURT
City-St-Zip: LONGWOOD, FL 32779

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: ROBERT T. JORDAN

MGRM

02/07/2007

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