

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063912

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: KINGDOM COMMUNICATIONS LLC

**Current Principal Place of Business:**

13158 BALTIMORE WOODS LN.  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

13158 BALTIMORE WOODS LN.  
ORLANDO, FL 32824

**New Mailing Address:**

FEI Number: 87-0776466

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEVER, JOSEPH L JR  
13158 BALTIMORE WOODS LN.  
ORLANDO, FL 32824 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DEVER, JOSEPH L JR  
Address: 5424 FITNESS CIRCLE #101  
City-St-Zip: ORLANDO, FL 32839

Title: MGRM ( ) Delete  
Name: DEVER, PHYLLISA  
Address: 5424 FITNESS CIRCLE #101  
City-St-Zip: ORLANDO, FL 32839

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DEVER, JOSEPH L JR  
Address: 13158 BALTIMORE WOODS LANE  
City-St-Zip: ORLANDO, FL 32824

Title: MGRM (X) Change ( ) Addition  
Name: DEVER, PHYLLISA  
Address: 13158 BAOTIMORE WOODS LANE  
City-St-Zip: ORLANDO, FL 32824

I hereby certify that the information supplied with this filing does not qualify 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: PHYLLISA DEVER

MGRM

04/21/2008

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