

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088200

FILED  
Apr 27, 2008  
Secretary of State

**Entity Name:** NORTHERN LIGHTS COMMUNICATIONS LLC

**Current Principal Place of Business:**

8705 NORTH MESSINA LOOP  
CRYSTAL RIVER, FL 34428

**New Principal Place of Business:**

**Current Mailing Address:**

8705 NORTH MESSINA LOOP  
CRYSTAL RIVER, FL 34428

**New Mailing Address:**

**FEI Number:** 20-5512202

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: HAND, MORGAN M  
Address: 8705 NORTH MESSINA LOOP  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: MGRM ( ) Delete  
Name: HAND, GAIL M  
Address: 8705 NORTH MESSINA LOOP  
City-St-Zip: CRYSTAL RIVER, FL 34428

**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 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:** MOORGAN M. HAND

MGRM

04/27/2008

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