

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000015285

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** THE VOIP CONNECTION LLC

**Current Principal Place of Business:**

1300 PINETREE DRIVE  
UNIT 12  
INDIAN HARBOUR BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

1300 PINETREE DRIVE  
UNIT 12  
INDIAN HARBOUR BEACH, FL 32937 US

**New Mailing Address:**

**FEI Number:** 74-3204698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROWN, MICHAEL A  
1300 PINETREE DRIVE  
UNIT 12  
INDIAN HARBOUR BEACH, FL 32937 US

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

MILLICORP, INC  
1300 PINETREE DR.  
#12  
INDIAN HARBOUR BEACH, FL 32937 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: MICHAEL CROWN

04/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MILLICORP, INC.  
Address: 9101 W. COLLEGE POINTE DR., STE 2  
City-St-Zip: FORT MYERS, FL 33919 33

Title: MGR  
Name: MICHAEL, CROWN A  
Address: 1300 PINETREE DRIVE, UNIT 12  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

I hereby 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: MICHAEL CROWN

MGR

04/28/2011

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