2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118440

Address:

City-St-Zip:

22 VILLAGE CIRCLE EAST

MANORVILLE, NY 11949 US

Entity Name: FLORIDA CELL & TOWER TECHNOLOGY, LLC

FILED Jul 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7448 GATES CIRCLE SPRING HILL, FL 34606 US **Current Mailing Address: New Mailing Address:** 7448 GATES CIRCLE 99 WEST MAIN STREET SPRING HILL, FL 34606 US EAST ISLIP, NY 11730 US FEI Number: 75-3262278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEBLANCO, NICHOLAS 7448 GATEŚ CIRCLE SPRING HILL, FL 34606 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MOONEY, ED Name: Name: Address: 7448 GATES CIRCLE Address: City-St-Zip: SPRING HILL, FL 34606 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DEBLANCO, NICHOLAS Name: Address: 7448 GATES CIRCLE Address: City-St-Zip: SPRING HILL, FL 34606 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DEBLANCO, JILL Name: Name: 7448 GATES CIRCLE Address: Address: City-St-Zip: SPRING HILL, FL 34606 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: RUSSO, MARIE Name:

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.

Address:

City-St-Zip:

SIGNATURE: EDWARD MOONEY MGRM 07/28/2008