2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L07000126801

Entity Name: TELCONN DIRECTORIES LLC

Current Principal Place of Business:

8164 WINTER ST
BROOKSVILLE, FL 34613

New Principal Place of Business:

5064 GEVALIA DR
BROOKSVILLE, FL 34604

Current Mailing Address:

8164 WINTER ST
BROOKSVILLE, FL 34613

New Mailing Address:

5064 GEVALIA DR
BROOKSVILLE, FL 34604

FEI Number: 26-1660858 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCDANIEL, M. JOE
8164 WINTER ST
BROOKSVILLE, FL 34613 US

Name and Address of New Registered Agent:

MCDANIEL, M. JOE
5064 GEVALIA DR
BROOKSVILLE, FL 34604 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: _____ 01/15/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MCDANIEL, M. JOE
Address: 8164 WINTER ST
City-St-Zip: BROOKSVILLE, FL 34613

Title: MGR ( ) Delete
Name: MCDANIEL, CONNIE S
Address: 8164 WINTER ST
City-St-Zip: BROOKSVILLE, FL 34613

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MCDANIEL, M. JOE
Address: 5064 GEVALIA DR
City-St-Zip: BROOKSVILLE, FL 34604

Title: MGR (X) Change ( ) Addition
Name: MCDANIEL, CONNIE S
Address: 5064 GEVALIA DR
City-St-Zip: BROOKSVILLE, FL 34604

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: M. JOE MCDANIEL MGR 01/15/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date