

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092954

FILED
Jan 14, 2009
Secretary of State

Entity Name: TELANOBIS LLC

Current Principal Place of Business:

92 E. GARDEN ST.
PENSACOLA, FL 32502

New Principal Place of Business:

94 E. GARDEN ST.
PENSACOLA, FL 32502

Current Mailing Address:

92 E. GARDEN ST.
PENSACOLA, FL 32502

New Mailing Address:

94 E. GARDEN ST.
PENSACOLA, FL 32502

FEI Number: 26-3447745

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: IRBY, JULIAN
Address: 92 E. GARDEN ST.
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM () Delete
Name: REMO, ERIK
Address: 92 E. GARDEN ST.
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM () Delete
Name: IRBY, JOEL
Address: 92 E. GARDEN ST.
City-St-Zip: PENSACOLA, FL 32502

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JULIAN B. IRBY

PRES

01/14/2009

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