

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095348

FILED  
Jun 25, 2009  
Secretary of State

**Entity Name:** TANDEM COMMUNICATIONS OF FLORIDA, LLC

**Current Principal Place of Business:**

2042 BEAUREGARD STREET  
PORT ST. LUCIE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

2042 BEAUREGARD STREET  
PORT ST. LUCIE, FL 34953 US

**New Mailing Address:**

FEI Number: 26-3616190      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

GIACHINO, FERNANDO M  
17 MARTIN LUTHER KING JR. BLVD  
SUITE 200  
STUART, FL 34994 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:**

Title: MGRM ( ) Delete  
Name: COLYARD, JOHN  
Address: 490 SILVER THORN DRIVE  
City-St-Zip: WELLFORD, SC 29385 US

Title: MGRM ( ) Delete  
Name: WILLIAMSON, NATHANIEL  
Address: 2042 BEAUREGARD STREET  
City-St-Zip: PORT ST. LUCIE, FL 34953 US

**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: JOHN COLYARD

MGR

06/25/2009

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