

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000017612

FILED
Apr 30, 2010
Secretary of State

Entity Name: CELLULAR SOLUTIONS OF LEE COUNTY, LLC

Current Principal Place of Business:

53 HOMESTEAD ROAD N
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

53 HOMESTEAD ROAD N
LEHIGH ACRES, FL 33936 US

New Mailing Address:

FEI Number: 26-4311664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODDE, CHARLES G JR
25 HOMESTEAD RD N STE 29
LEHIGH ACRES, FL 33936 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: MGR
Name: HODDE, CHARLES G JR
Address: PO BOX 417
City-St-Zip: LEHIGH ACRES, FL 33970 US

Title: MGR
Name: HODDE, LINDA J
Address: PO BOX 417
City-St-Zip: LEHIGH ACRES, FL 33970 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: CHARLES G HODDE JR

MGR

04/30/2010

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