

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000685

FILED  
Mar 18, 2009  
Secretary of State

**Entity Name:** NATIONWIDE COMMUNICATION SERVICES, LLC

**Current Principal Place of Business:**

6881 KINGSPONTE PKWY  
STE 16  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 618133  
ORLANDO, FL 32861

**New Mailing Address:**

**FEI Number:** 59-3517454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

USHER, JAMES R  
6881 KINGSPONTE PKWY  
STE 16  
ORLANDO, FL 32819 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: USHER, JAMES R MGRM  
Address: P.O. BOX 618133  
City-St-Zip: ORLANDO, FL 328618133

Title: MGRM ( ) Delete  
Name: BOTLICK, THOMAS D MGRM  
Address: P.O. BOX 618133  
City-St-Zip: ORLANDO, FL 32861

**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: THOMAS BOTLICK

MGR

03/18/2009

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