2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000008264

1. Entity Name RESIDENTIAL TELECOM, LLC



Principal Place of Business

SIGNATURE:

500 AUSTRALIAN AVENUE SOUTH, SUITE 110

SUITE 120 WEST PALM BEACH, FL 33401-6246 Mailing Address

500 AUSTRALIAN AVENUE SOUTH, SUITE 110 SUITE 120

WEST PALM BEACH, FL 33401-6246

FILED Apr 18, 2005 8:00 am Secretary of State

04-18-2005 90071 003 ****50.00

20034749



03142005 No Chg-LLC

1-15-05

CR2E083 (10/03)

4. FEI Number		Applied For
65-0975431	 	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

RHODES, PAUL 500 AUSTRALIAN AVENUE SOUTH, SUITE 110 WEST PALM BEACH, FL 33401-6246

DO	Ň	OT	WRIT	ſΕ
IN	TH	IIS	SPAC	E

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or both, in the Stat	e of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D:	iling Fee is \$50.00 ue by May 1, 2005	·	
9.	MANAGING MEMBERS/MANAGERS		The second secon
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RHODES, PAUL 500 AUSTRALIAN AVĖ., S. #120 WEST PALM BEACH, FL 33401		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	,WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		
indicated	I on this report is true and accurate and that my signature sh	qualify for the exemption stated in Section 119.07(3)(i), Florida St hall have the same legal effect as if made under oath; that I am a cute this report as required by Chapter 608, Florida Statutes.	atutes. I further certify that the information managing member or manager of the

Knocks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE