

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001270

FILED
Feb 04, 2004
Secretary of State

Entity Name: ALLTEL WIRELESS HOLDINGS, LLC

Current Principal Place of Business:

ONE ALLIED DRIVE
LITTLE ROCK, AR 72202

New Principal Place of Business:

Current Mailing Address:

ONE ALLIED DRIVE
LITTLE ROCK, AR 72202

New Mailing Address:

FEI Number: 71-0835978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MEMBERS:

Title: MGR () Delete
Name: FORD, SCOTT T
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

Title: MGR () Delete
Name: FRANTZ, FRANCIS X
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

Title: MGR () Delete
Name: GARDNER, JEFFERY
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

Title: P () Delete
Name: BEEBE, KEVIN
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

Title: T () Delete
Name: SETTELMYER, SCOTT
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

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:

Title: MGRM (X) Change () Addition
Name: BEEBE, KEVIN
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

Title: MGRM (X) Change () Addition
Name: SETTELMYER, SCOTT
Address: ONE ALLIED DRIVE
City-St-Zip: LITTLE ROCK, AR 72202

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT SETTELMYER MGRM 02/04/2004

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