


FILED
May 10, 2004 8:00 am
Secretary of State

04-23-2004 90020 035 ****50.00

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M01000000794		
1. Entity Name ACCXX COMMUNICATIONS, LLC		
Principal Place of Business 4035 TAMPA ROAD SUITE 6000 OLDSMAR, FL 34677		Mailing Address 4035 TAMPA ROAD SUITE 6000 OLDSMAR, FL 34677
DO NOT WRITE IN THIS SPACE		
		04052004 No Chg-LLC CR2E083 (10/03)
		4. FEI Number 59-3699529
		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent TCS CORPORATE SERVICES, INC. 103 N. MERIDIAN STREET TALLAHASSEE, FL 32301-0000		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Filing Fee is \$50.00 Due by May 1, 2004		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR DORSETT, STEPHEN M 4035 TAMPA ROAD, SUITE 6000 OLDSMAR, FL 34677	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR CONWAY, MICHAEL 4035 TAMPA ROAD, SUITE 6000 OLDSMAR, FL 34677	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR ANDERSON, JAMES 4035 TAMPA ROAD SUITE 6000 OLDSMAR, FL 34677	
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>James Anderson</u>		05/05/04 8882392233
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #