

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # M01000001099**

1. Entity Name  
**HARBINGER TAMPA BAY LLC**



Principal Place of Business  
**1901 6TH AVE. NORTH, STE. 2001  
BIRMINGHAM, AL 35203 US**

Mailing Address  
**1901 6TH AVE. NORTH, STE. 2001  
BIRMINGHAM, AL 35203 US**

**DO NOT WRITE IN THIS SPACE**



01042005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**63-1274960**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY  
1201 HAY\$ STREET  
TALLAHASSEE, FL 32301-2525**

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE **P**  
NAME **HARBERT, RAYMOND J**  
STREET ADDRESS **ONE RIVERCHASE PARKWAY**  
CITY-ST-ZIP **BIRMINGHAM, AL 35244**

TITLE **VPS**  
NAME **BROOKE, WILLIAM W**  
STREET ADDRESS **ONE RIVERCHASE PARKWAY**  
CITY-ST-ZIP **BIRMINGHAM, AL 35244**

TITLE **VP**  
NAME **PIASSICK, JOEL B**  
STREET ADDRESS **ONE RIVERCHASE PARKWAY**  
CITY-ST-ZIP **BIRMINGHAM, AL 35244**

TITLE **VPT**  
NAME **MILLER, CHARLES D**  
STREET ADDRESS **ONE RIVERCHASE PARKWAY**  
CITY-ST-ZIP **BIRMINGHAM, AL 35244**

TITLE **VP**  
NAME **WHITE, MICHAEL P**  
STREET ADDRESS **ONE RIVERCHASE PARKWAY**  
CITY-ST-ZIP **BIRMINGHAM, AL 35244**

TITLE **VP**  
NAME **BOUTWELL, DAVID A**  
STREET ADDRESS **ONE RIVERCHASE PARKWAY**  
CITY-ST-ZIP **BIRMINGHAM, AL 35244**

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04/12/05-80009-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 808, Florida Statutes.

SIGNATURE: David Boutwell V.P.

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

4-5-06

Date

205-787-5500

Daytime Phone #