

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # M01000001100

1. Entity Name
HARBINGER TAMPA BAY II LLC



Principal Place of Business
1901 6TH AVENUE NORTH
SUITE 2001
BIRMINGHAM, AL 35203

Mailing Address
1901 6TH AVENUE NORTH
SUITE 2001
BIRMINGHAM, AL 35203

DO NOT WRITE IN THIS SPACE



01042005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
63-1275831

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 HAYS 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, JOOL 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 D
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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04/13/05-B0100-002 150.00

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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)(f), 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: *David A. Boutwell, V.P.*

4-6-05

205-987-6500

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

Date

Daytime Phone #