2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000002111

1. Entity Name HOA BROADBAND I, LLC

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED TO A COUNTY OF THE PRINTED TO A COUNTY OF T



FILED Apr 27, 2004 8:00 am Secretary of State 04-27-2004 90017 038 ****50.00

Stock Country Zip Country S. Certificate of Status Desired S5.00 Additional Fee Required Fee Requ				- T						
Suite, Apl. 4, etc. Suite, Apl. 4, etc. City & State City &	3103 PHILMONT AVENUE		3103 PHILMONT AVENUE		1111111				: BF1 (()	
City & States	2. Principal Place of Business		3. Mailing Address							
Z3-3018261 St. Application St. Opening Zip Country St. Certificate of Stratus Desired St. Op. Additional Perior Required St. Name and Address of Current Registered Agent T. Name and Address of Name Registered Agent T. Name Agent T. Name and Address of Name Registered Agent T. Name Agen	Suite, Apt. #, etc.		Suite, Apt. #, etc.		04152004	Chg-LLC	CR2E083	3 (10/03)		
Section Sect	City & State		City & State							
Name	Zip	Country	Zip	Country	5. Certificat	e of Status Desired				
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		6. Name and Address of Current	Registered Agent		7. Name an	d Address of New F	Registered Ag	ent		
City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or protect name of registered agent. ONTE Registered Agent supraum required when nematicing) DATE	1200 SOU PLANTATI	TH PINE ISLAND ROAD				oer is Not Acceptabl	le)			
THE HUNTINGTON VALLEY, PA TITLE MGR BARZILLAY, ZVI SIREET ADDRESS CITY-ST-2P HUNTINGTON VALLEY, PA TITLE MGR BARZILLAY, ZVI SIREET ADDRESS CITY-ST-2P HUNTINGTON VALLEY, PA TITLE MGR BARZILLAY, ZVI SIREET ADDRESS CITY-ST-2P HUNTINGTON VALLEY, PA TITLE MGR BARZILLAY, ZVI SIREET ADDRESS CITY-ST-2P TITLE MGR CAPY, KENNETH J SIREET ADDRESS CITY-ST-2P TITLE MGR BARZILLAY, ZVI SIREET ADDRESS CITY-ST-2P TITLE MGR BASSING JOSS CITY-ST-2P TITLE MME GARY, KENNETH J SIREET ADDRESS CITY-ST-2P TITLE MME GARY, KENNETH J SIREET ADDRESS CITY-ST-2P TITLE MME GRAY, KENNETH J SIREET ADDRESS CITY-ST-2P TITLE MME GRAY SIREET ADDRESS CITY-ST-2P TITLE MAME SIREET ADDRESS CITY-ST-2P TITLE MA	•		•	City			FL	Zip Cod	e	
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9. MANAGING MEMBERS / MANAGERS 10. ADDITIONS / CHANGES TITLE MGR	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
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11. Thereby 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 lead effect as if made under cath; that I am a managing member or managing m	CITY-ST-ZIP								į	
limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	indicated	on this report is true and accurate and	d that my signature shall have	a the same legal effect	as if made under oa	th; that I am a mana	. I further certif aging member	y that the i or manage	nformation er of the	

4/15/04

Date

(215) 938-8000

Daytime Phone #