2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2007
Secretary of State

DOCUMENT# M02000000592

Entity Name: INSTITUTIONAL NETWORK COMMUNICATIONS, LLC

Current Principal Place of Business:

6999 SHELBYVILLE RD.
SIMPSONVILLE, KY 40067

New Principal Place of Business:

304 S MAGNOLIA STREET
TOMPKINSVILLE, KY 42167

Current Mailing Address:

P. O. BOX 516
TOMPKINSVILLE, KY 42167

New Mailing Address:

FEI Number: 61-1380692 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TELEMEDIA COMMUNICATIONS, INC.
100 THORNHILL ROAD
AUBURNDALE, FL 338233938 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/MANAGERS:

Title: MGRM ( ) Delete
Name: NUNN, RICK
Address: 1334 NARROWS OF THE HARPETH RD.
City-St-Zip: KINGSTON SPRINGS, TN 37082

Title: MGRM ( ) Delete
Name: NUNN, TIM
Address: 6999 SHELBYVILLE RD.
City-St-Zip: SIMPSONVILLE, KY 40067

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: NUNN, TIM
Address: 3646 MURPHY LANE
City-St-Zip: MT EDEN, KY 40046

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TIM NUNN MGR 02/13/2007

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