

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003485

Entity Name: UNITYCOMM, LLC

FILED
Jan 09, 2006
Secretary of State

Current Principal Place of Business:

101 MAIN STREET
SYRACUSE, IN 46567

New Principal Place of Business:

Current Mailing Address:

101 MAIN STREET
SYRACUSE, IN 46567

New Mailing Address:

FEI Number: 42-1575525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, JOSEPH
838 VILLAGE WAY
PALM HARBOR, FL 34683 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: MM () Delete
Name: PLIKERD, BENJAMIN M
Address: PO BOX 250
City-St-Zip: SYRACUSE, IN 46567

Title: MM () Delete
Name: ISAACS, JOSEPH
Address: 838 VILLAGE WAY, SUITE 1200
City-St-Zip: PALM HARBOR, FL 34683

Title: MM () Delete
Name: WENGER, SCOTT N
Address: PO BOX 250
City-St-Zip: SYRACUSE, IN 46567

ADDITIONS/CHANGES:

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

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

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

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: BENJAMIN M PLIKERD

MM

01/09/2006

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