

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000427

FILED
Mar 29, 2012
Secretary of State

Entity Name: CYPRESS COMMUNICATIONS OPERATING COMPANY, LLC

Current Principal Place of Business:

1228 EUCLID AVE
STE 390
CLEVELAND, OH 44115 US

New Principal Place of Business:

3565 PIEDMONT ROAD, NE
BUILDING 4, SUITE 600
ATLANTA, GA 30305 US

Current Mailing Address:

1228 EUCLID AVE
STE 390
CLEVELAND, OH 44115 US

New Mailing Address:

3565 PIEDMONT ROAD, NE
BUILDING 4, SUITE 600
ATLANTA, GA 30305 US

FEI Number: 58-2536853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH CT NORTH
LOXAHATCHEE, FL 33470 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
Name: CYPRESS COMMUNICATIONS, LLC
Address: 3565 PIEDMONT ROAD, BLDG. 4, SUITE 600
City-St-Zip: ATLANTA, GA 30305 US

Title: CEO
Name: TEMNOROD, ANDRE
Address: 75 ERIEVIEW PLAZA, SUITE 400
City-St-Zip: CLEVELAND, OH 44114 US

Title: T
Name: BLUMIN, EUGENE
Address: 75 ERIEVIEW PLAZA, SUITE 400
City-St-Zip: CLEVELAND, OH 44114 US

Title: S
Name: GERTSBURG, ALEXANDER E
Address: 75 ERIEVIEW PLAZA, SUITE 400
City-St-Zip: CLEVELAND, OH 44114 US

Title: CFO
Name: DRAKE, SCOTT L
Address: 3565 PIEDMONT ROAD, NE, BLDG. 4, SUITE 600
City-St-Zip: ATLANTA, GA 30305 US

I hereby 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: ALEXANDER E. GERTSBURG

S

03/29/2012

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