

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001041

FILED
Aug 08, 2007
Secretary of State

Entity Name: TOUCHSTONE COMMUNICATIONS-II, LLC

Current Principal Place of Business:

515 HOUSTON STE 860
FORT WORTH, TX 76102

New Principal Place of Business:

1109 CHEEK SPARGER
SUITE 100
COLLEYVILLE, TX 76034

Current Mailing Address:

515 HOUSTON STE 860
FORT WORTH, TX 76102

New Mailing Address:

1109 CHEEK SPARGER
SUITE 100
COLLEYVILLE, TX 76034

FEI Number: 06-1732710 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: MEYER, MICHAEL DEAN
Address: 515 HOUSTON STE 860
City-St-Zip: FORT WORTH, TX 76102

Title: SCEO () Delete
Name: SLONE, THOMAS R
Address: 515 HOUSTON STE 860
City-St-Zip: FORT WORTH, TX 76102

Title: D () Delete
Name: ASLAM, FARUKH
Address: EVACUEE TRUST COMPLEX SIR AGHA RD F-51
City-St-Zip: ISLAMABAD PAKISTAN,

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: MEYER, MICHAEL DEAN
Address: 1109 CHEEK SPARGER
City-St-Zip: COLLEYVILLE, TX 76034

Title: SCEO (X) Change () Addition
Name: SLONE, THOMAS R
Address: 1109 CHEEK SPARGER
City-St-Zip: COLLEYVILLE, TX 76034

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

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL DEAN MEYER

P

08/08/2007

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