

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002427

Entity Name: SBC LONG DISTANCE, LLC

FILED  
Jan 30, 2009  
Secretary of State

**Current Principal Place of Business:**

5130 HACIENDA BLVD.  
DUBLIN, CA 94568

**New Principal Place of Business:**

**Current Mailing Address:**

175 E. HOUSTON ST., RM. 8-H-60  
SAN ANTONIO, TX 78205

**New Mailing Address:**

1010 N. ST. MARY'S ST.  
RM. 9-002  
SAN ANTONIO, TX 78215

FEI Number: 74-2746907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR ( ) Delete  
Name: LONG, GARY L  
Address: 1010 N. ST. MARY'S STREET  
City-St-Zip: SAN ANTONIO, TX 78215

Title: MGR ( ) Delete  
Name: RESNICK, RICHARD P  
Address: 208 S. AKARD STREET  
City-St-Zip: DALLAS, TX 75202

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LONG, GARY L  
Address: 1010 N. ST. MARY'S ST.  
City-St-Zip: SAN ANTONIO, TX 78215

Title: MGR (X) Change ( ) Addition  
Name: RESNICK, RICHARD P  
Address: 208 S. AKARD ST.  
City-St-Zip: DALLAS, TX 75202

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: GARY L. LONG

MGR

01/30/2009

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