

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004088

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** THOROUGHbred TECHNOLOGY AND TELECOMMUNICATIONS, LLC

**Current Principal Place of Business:**

THREE COMMERCIAL PLACE  
C/O OFFICE OF CORPORATE SECRETARY  
NORFOLK, VA 23510

**New Principal Place of Business:**

**Current Mailing Address:**

THREE COMMERCIAL PLACE  
C/O OFFICE OF CORPORATE SECRETARY  
NORFOLK, VA 23510

**New Mailing Address:**

**FEI Number:** 42-1671397

**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: CLEVELAND, JAMES R JR  
Address: 1281 FULTON INDUSTRIAL BLVD  
City-St-Zip: ATLANTA, GA 30336

Title: MGR ( ) Delete  
Name: WIMBUSH, F B  
Address: THREE COMMERCIAL PLACE  
City-St-Zip: NORFOLK, VA 23510

Title: MGR ( ) Delete  
Name: RUMSEY, RAYMOND J  
Address: THREE COMMERCIAL PLACE  
City-St-Zip: NORFOLK, VA 23510

Title: MGR ( ) Delete  
Name: SQUIRES, JAMES A  
Address: THREE COMMERCIAL PLACE  
City-St-Zip: NORFOLK, VA 23510

Title: MGR ( ) Delete  
Name: SMITH, DANIEL D  
Address: THREE COMMERCIAL PLACE  
City-St-Zip: NORFOLK, VA 23510

Title: MGR ( ) Delete  
Name: RAVILLE, STEPHEN E  
Address: THREE PIEDMONT CENTER, SUITE 150  
City-St-Zip: ATLANTA, GA 30305

**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:

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 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: RICHARD CLARKE

SUPV

04/28/2009

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