

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004244

FILED  
Jul 21, 2006  
Secretary of State

Entity Name: THE NET PHONE COMPANY

**Current Principal Place of Business:**

2215 WEMBLEY PLACE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

2215 WEMBLEY PLACE  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 30-0320575      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

PERRIN, CALEB K  
2215 WEMBLEY PLACE  
OVIEDO, FL 32765    US

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

PERRIN, DAVID P  
2215 WEMBLEY PLACE  
OVIEDO, FL 32765    US

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: DAVID T.P. PERRIN

07/21/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: PERRIN, DAVID  
Address: 2215 WEMBLEY PLACE  
City-St-Zip: OVIEDO, FL 32765

Title: MGR      ( ) Delete  
Name: PERRIN, ALETHIA  
Address: 2215 WEMBLEY PLACE  
City-St-Zip: OVIEDO, FL 32765

Title: MGR      (X) Delete  
Name: PERRIN, CALEB  
Address: 2215 WEMBLEY PLACE  
City-St-Zip: OVIEDO, FL 32765

**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: DAVID T.P. PERRIN

MRG

07/21/2006

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