

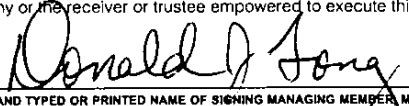


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90311 006 ****50.00

DOCUMENT # M06000000669 1. Entity Name AMERICAN TELEPARTNERS, LLC						
Principal Place of Business 375 COMMERCE PARKWAY ROCKLEDGE, FL 32955			Mailing Address 375 COMMERCE PARKWAY ROCKLEDGE, FL 32955			
2. Principal Place of Business - No P.O. Box # 317 Riveredge Blvd.		3. Mailing Address P.O. Box 560697				
Suite, Apt. #, etc. Suite 200		Suite, Apt. #, etc.				
City & State Cocoa, Florida		City & State Rockledge, Florida		4. FEI Number 20-2107004		
Zip 32922	Country Brevard	Zip 32956-0697	Country Brevard	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent RIDDER, STEVAN G 375 COMMERCE PARKWAY ROCKLEDGE, FL 32955			7. Name and Address of New Registered Agent Name Ridder, Stevan G. Street Address (P.O. Box Number is Not Acceptable) 317 Riveredge Blvd., Suite 200 City Cocoa FL Zip Code 32922			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Stevan G. Ridder MGR  1/31/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>						
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR <input type="checkbox"/> Delete FOLEY, PATRICK J 375 COMMERCE PARKWAY ROCKLEDGE, FL 32955			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 317 Riveredge Blvd., Suite 200 Cocoa, Florida 32922	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR <input type="checkbox"/> Delete LONG, DONALD J 375 COMMERCE PARKWAY ROCKLEDGE, FL 32955			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 317 Riveredge Blvd., Suite 200 Cocoa, Florida 32922	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 				1/31/07 (321) 433-8228 <small>Date Daytime Phone #</small>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>						

60015021




01222007 Chg-LLC CR2E083 (12/06)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

Name
Ridder, Stevan G.
Street Address (P.O. Box Number is Not Acceptable)
317 Riveredge Blvd., Suite 200
City Cocoa FL Zip Code 32922

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Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

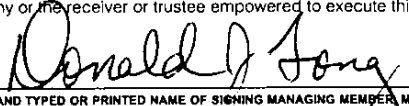
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SIGNATURE:



1/31/07 (321) 433-8228
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE