

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000003179

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** XCPT COMMUNICATION TECHNOLOGIES, LLC

**Current Principal Place of Business:**

530 U.S. HIGHWAY 41 BYPASS SOUTH, STE 9B  
VENICE, FL 34285

**New Principal Place of Business:**

1990 MAIN STREET  
SUITE 750  
SARASOTA, FL 34236

**Current Mailing Address:**

530 U.S. HIGHWAY 41 BYPASS SOUTH, STE 9B  
VENICE, FL 34285

**New Mailing Address:**

1990 MAIN STREET  
SUITE 750  
SARASOTA, FL 34236

**FEI Number:** 20-4920405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELDMAN, STEVEN J DDS  
530 U.S. HIGHWAY 41 BYPASS SOUTH, STE 24B  
VENICE, FL 34285 US

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

FELDMAN, STEVEN J DDS  
236 MILAN AVENUE  
VENICE, FL 34285 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: STEVEN FELDMAN

02/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FELDMAN, STEVEN J DDS  
Address: 236 MILAN AVENUE WEST  
City-St-Zip: VENICE, FL 34285

I hereby 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: STEVEN FELDMAN

MGR

02/17/2011

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