## . 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jun 04, 2007 8:00 am Secretary of State

DOCUMENT # M0600005572  1. Entry Name NETEAM CONVERGENCE, LLC						05-01-2007 9	00333 028 ****5:	5.00
Principal Place of Business Mailing Address					1			
791 WYE RO.		791 WYE ROAD AKRON, OH 44333						
AKRON, OH	44333	AARON, OT 44333						
		Ta Mallan Adda						
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address			HARMAN	FI NOTIN DIGH DONK DOCKY ROFF	I BEIRK BENEN ECHEN ETHE (EEFIB H	
Suite, Apt. #, etc.		Suite, Apt. #. etc.		01052007	Chg-LLC	CR2E083 (12/06)		
City & State		City & State		4. FEI Numb			pplied For	
					56-	2610507		ot Applicable
Zip	Country Zip		Country		5. Certificate	e of Status Desired	\$5.00 Add	
	6. Name and Address of Current	Registered Agent			7, Name sn	d Address of New R	<u>-</u>	
OT 0000	ODATION OVOTEM		Nam	9				
	ORATION SYSTEM TH PINE ISLAND ROAD		Stree	Address (	P.O. Box Numb	per is Not Acceptable	)	
	ION, FL 33324							
			<u> </u>	·		<del></del>		<del></del> .
			City				FL Zip Cod	le
	named entity submits this statement for tions of registered agent.	or the purpose of changing its re	gistered offic	e or register	red agent, or b	oth, in the State of Flo	rida. Fam familiar with,	, and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title 4 applicable. (NOTE: F	legazered Agent si	Sympton inclning	d when reinstating)		DATE	
F	iling Fee Is \$50.00 ue by May 1, 2007				Make check payable to Florida Department of State			
9.	MANAGING MEMBI	ERS/MANAGERS	10.			ADDITIONS/	CHANGES	
TITLE	MGRM	Delete	TITLE	1			Change	Addition Addition
NAME STREET ADDRESS	MEYERSON, ROBERT R 791 WYE ROAD		NAME STREET ADDRE	<sub>26</sub>				
CITY-ST-ZIP	AKRON, OH 44333		CITY-S1-ZIP	~				
TITLE	MGRM	☐ Deleta	MILE	P, C	EO,		Change	☐ Addition
NAME	FANNING, H DAVID		NAME	_ H. C	AVID F	an Nine		
STREET ADORESS CITY-ST-ZIP	791 WYE ROAD AKRON, OH 44333		STREET ADDRE		WYE RO			
mu	MGRM	₩ Delete	TITLE	S,T	ZON OH	77 505	Change	52 Addition
NAME	WYSS, MICHAEL A	2000	NAME	ELIM	JOA M.	CULOTTA		_
STREET ADDRESS	791 WYE ROAD		STREET ADORE		WYE A			
CITY-ST-ZIP	AKRON, OH 44333			AKA	MON. DH	<u> </u>		
NAME		☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS	l .		STREET ADDRE	ss				
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS			name Street adore	ss				
CITY-ST-ZIP			CITY-ST-ZIP	-				
MILE	<u> </u>	☐ Detete	TITLE	$\top$			☐ Change	Addition
HAME	1		NAME				_	
				1				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRE	ss				

11. Thereby 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, Rorida Statutes.

SIGNATURE: LINOR CULOTTA SICRITIONS 4/30/07 330/466-6380