


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**


**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M06000006189**  
 1. Entity Name  
**KEYSTONE WIRELESS, LLC**



Principal Place of Business      Mailing Address  
**27599 RIVERVIEW CENTER BLVD., SUITE 201**      **27599 RIVERVIEW CENTER BLVD., SUITE 201**  
**BONITA SPRINGS, FL 34134**      **BONITA SPRINGS, FL 34134**

**DO NOT WRITE IN THIS SPACE**



03202007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>82-0553942</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**NRAI SERVICES, INC.**  
**2731 EXECUTIVE PARK DRIVE, SUITE 4**  
**WESTON, FL 33331**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PC MANAGEMENT, INC. 27599 RIVERVIEW CENTER BLVD., SUITE 201 BONITA SPRINGS, FL 34134
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 04/26/07-80023-010 50.00

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:**       **3-26-2007**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #