2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# M07000000127

Entity Name: UNLIMITED TOWER SERVICES, LLC

Current Principal Place of Business:

3930 LITTLE FALLS DR.
CUMMING, GA 30041

New Principal Place of Business:

Current Mailing Address:

3930 LITTLE FALLS DR.
CUMMING, GA 30041

New Mailing Address:

FEI Number: 11-3695365 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAVEL, LYNN
INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	HARDEN, RON	
Address:	3930 LITTLE FALLS DR.	
City-St-Zip:	CUMMING, GA 30041	
Title:	MGR	( ) Delete
Name:	HARDEN, SCOTT	
Address:	3930 LITTLE FALLS DR.	
City-St-Zip:	CUMMING, GA 30041	
Title:	MGR	( ) Delete
Name:	HENRY, ADRIAN	
Address:	3930 LITTLE FALLS DR.	
City-St-Zip:	CUMMING, GA 30041	
Title:	MGR	( ) Delete
Name:	TAVEL, LYNN N	
Address:	3930 LITTLE FALLS DR.	
City-St-Zip:	CUMMING, GA 30041	

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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: LYNN TAVEL CONT 04/08/2008

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