File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 APR 23 PM 2: 08

ipn network, LLC, LIMITED COMPANY 601 MAINSTREAM DRIVE NASHVILLE TN 37228							1a. Principal Place of Business Address 601 MAINSTREAM DRIVE NASHVILLE TN 37228						
2. Principal Place of Business 2a. Mallic				ng Address				3. Date O	rganize	d or Qualified	3a. State of Formation		
Suite, Apt. #, etc. Suite, Ap			t. #, etc.				08/25/1995 4. FEI Number			TN			
City & State City & Sta				ate				62-1	608	220	Applied For Not Applicable		
Zip Country Zip			Country				5. Date of Last Report			6. Certificate of Status Desired			
							03/3	3/31/1997			\$8.75 Additional Fee Required		
7. Name and Address of Current Registered				Agent	<del></del>	Name	8. N	ame and A	ddress	of New Regist	tered Ag	ent/Office	····
THE PRENTICE-HALL CORPORATION 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301				ON SY	STEM,	Street Add	Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.						
						City	City			FL	Zip Code		
its register as registe	red office or regi red agent, and	sions of Sections 608.411 istered agent, or both, in t accept the obligations.						ve vote of a	majority	bmits this state of the members	s. I hereby	y accept the a	ppointment
SIGNATURE (Registered Agent Accepting Appointment) (N					IOTE Registered Agent signature required when reinstating				<del></del>				
10. Title	Managing Members/Managers			Business Street Address						City,	, State and Zip Code		
MGR	HODGE, JOE T			601 MAINSTREAM DRI				VE NASHVI			LLE TN		
MGR	KUNYSZ, JOHN			601 MAINSTREAM DRI				VE NASHVI			LLE TN		
MOR	**************************************	JOSIN		601=	MAINO	PREAM	DRI	VE-		NACHVI	LLE	TN	
MGR	ARMSTR	RONG, TERRY		601	MAINS!	re <b>a</b> m	DRI	VE		NASHVI	LLE	TN	
	1							ţ	50	0002 -04/28 ****1	502 798- 88.79	26:25 -01052- 5 ****	5——⊜ -014 188.75

Indicated on this annual 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 trust the empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address. attachment with an address. JOE T. Hodge, Member 4-13-98 615-461-2000

11. Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information

**SIGNATURE**%