File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED LIMITED LIABILITY COMPANY & FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State 98 APR 20 PH 3: 38 1998 **DIVISION OF CORPORATIONS** SECRETARY OF STATE TALLAHASSEE, FLORIDA FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # M9500000266 **DOCUMENT** # M9500000266 CELLNET TELECOMMUNICATIONS OF MICHIGAN, L. 18. Principal Place of Business Address P.O. BOX 71047 31075 JOHN R MADISON HEIGHTS MI 48071 MADISON HEIGHTS MI 48071 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 09/19/1995 ΜI Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 38-3209996 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 01/31/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name NRAI SERVICES, INC. 526 E. PARK AVENUE Street Address (P.O. Box Number Is Not Acceptable) TALLAHASSEE FL 32301 Suite, Apt. #, etc. Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE. (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM GOLDSMITH, RICHARD 31075 JOHN R MADISON HEIGHTS MI MGRM KOHLMAN, RUSSELL 31075 JOHN R MADISON HEIGHTS MI MGR DEJOHN, WILLIAM F 31075 JOHN R MADISON HEIGHTS MI S00002498895--3 -04/24/38--01003--021 ****188.75 ****188.75

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information 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 of control of the same appears in Block 10, or on an attachment with an address.

SIGNATURE:

William F. DeJohn

4/15 \$ 98 Date 248-616-0550

SIGNATURE AND TYPED OF PHINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER