

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001461

FILED
Apr 25, 2007
Secretary of State

Entity Name: DSLNET COMMUNICATIONS, LLC

Current Principal Place of Business:

545 LONG WHARF DRIVE, 5TH FLOOR
NEW HAVEN, CT 06511

New Principal Place of Business:

50 BARNES PARK NORTH
SUITE 104
WALLINGFORD, CT 06492

Current Mailing Address:

545 LONG WHARF DRIVE, 5TH FLOOR
NEW HAVEN, CT 06511

New Mailing Address:

50 BARNES PARK NORTH
SUITE 200
WALLINGFORD, CT 06942

FEI Number: 06-1523903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: STRUWAS, DAVID
Address: 545 LONG WHARF DRIVE
City-St-Zip: NEW HAVEN, CT 06511

Title: VP () Delete
Name: ESTERMAN, MARC
Address: 545 LONG WHARF DRIVE
City-St-Zip: NEW HAVEN, CT 06511

Title: CFO () Delete
Name: KEISCH, WALTER
Address: 545 LONG WHARF DRIVE
City-St-Zip: NEW HAVEN, CT 06511

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: YOUNG, D. CRAIG
Address: 555 ANTON BLVD., SUITE 200
City-St-Zip: COSTA MESA, CA 92626

Title: SEC (X) Change () Addition
Name: CHISHOLM, STEVEN
Address: 555 ANTON BLVD, SUITE 200
City-St-Zip: COSTA MESA, CA 06511

Title: ASEC (X) Change () Addition
Name: BROWNE, STEVE
Address: 555 ANTON BLVD, SUITE 200
City-St-Zip: COSTA MESA, CA 92622

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: SCHULA HOBBS

DREG

04/25/2007

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