2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000092329

Entity Name: NEXXTWORKS LONG DISTANCE, INC.

FILED Jul 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

30798 U.S. HWY 19 NORTH PALM HARBOR, FL 34684

Current Mailing Address: New Mailing Address:

30798 U.S. HWY 19 NORTH PALM HARBOR, FL 34684

FEI Number: 59-3539989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARTAGENA, RICHARD A 30798 U.S. HWY 19 NORTH PALM HARBOR, FL 34684 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: () Change () Addition

CARTAGENA, RICHARD A Name: Name: 30798 U.S. HWY 19 NORTH Address: Address: City-St-Zip: PALM HAROBR, FL 34684 US City-St-Zip:

Title: Title: () Delete (X) Change () Addition

Name: WILLS, NIKKI Name: WILLS, NIKKI 438 EVERGREEN DR Address: 30798 US HWY 19 N Address: OLDSMAR, FL 34677 US PALM HARBOR, FL 34684 US City-St-Zip: 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NIKKI WILLS 07/09/2009 S