

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044234

FILED
Feb 13, 2008
Secretary of State

Entity Name: TIN MAN, LLC

Current Principal Place of Business:

10156 US 90 E
LIVE OAK, FL 32060 US

New Principal Place of Business:

Current Mailing Address:

10156 US 90 E
LIVE OAK, FL 32060 US

New Mailing Address:

FEI Number: 83-0470465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOUCHTON, SARAH S
5808 CR 249
LIVE OAK, FL 32060 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: MGRM () Delete
Name: TOUCHTON, SARAH S
Address: 10156 US 90 E
City-St-Zip: LIVE OAK, FL 32060 US

Title: MGRM () Delete
Name: TOUCHTON, JAN R
Address: 10156 US 90 E
City-St-Zip: LIVE OAK, FL 32060 US

Title: MGRM () Delete
Name: JERNIGAN, JANUARY S
Address: 119 JOHN ST
City-St-Zip: LIVE OAK, FL 32064 US

Title: MGRM () Delete
Name: TOUCHTON, SARA B
Address: 819 TARA TRACE CIRCLE
City-St-Zip: LIVE OAK, FL 32064 US

Title: MGRM () Delete
Name: TOUCHTON, REBECCA A
Address: 10156 US 90 E
City-St-Zip: LIVE OAK, FL 32060 US

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:

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: SARAH S. TOUCHTON

MGRM

02/13/2008

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