

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088085

FILED
Jan 08, 2008
Secretary of State

Entity Name: 3 T.D.A., LLC

Current Principal Place of Business:

119 EAST PARK AVENUE
TALLHASSEE, FL 32301

New Principal Place of Business:

119 EAST PARK AVENUE
SUITE 2-C
TALLHASSEE, FL 32301

Current Mailing Address:

119 EAST PARK AVENUE
TALLHASSEE, FL 32301

New Mailing Address:

119 EAST PARK AVENUE
SUITE 2-C
TALLHASSEE, FL 32301

FEI Number: 13-4310621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINN, MICHELLE S
3322 AQUA RIDGE WAY
TALLAHASSEE, FL 32309 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: WINN, MICHELLE S
Address: 3322 AQUA RIDGE WAY
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: SOKOL, LESLIE W
Address: 2615 MARSTON ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR () Change (X) Addition
Name: WINN, JASON D
Address: 448 FRANK SHAW ROAD
City-St-Zip: TALLAHASSEE, FL 32312

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: MICHELLE S. WINN

MGRM

01/08/2008

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