

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012132

FILED
Mar 09, 2007
Secretary of State

Entity Name: TCL ONE, LLC

Current Principal Place of Business:

1161 NORTHLAKE WAY
PALM BEACH, FL 33480 US

New Principal Place of Business:

Current Mailing Address:

1161 NORTHLAKE WAY
PALM BEACH, FL 33480 US

New Mailing Address:

FEI Number: 74-3155623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRICIA LEBOW, P.A.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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: MARIA CRISTINA DE LO, S REYES FANJUL REV. TR
Address: C/O ONE NORTH CLEMATIS STREET, SUITE 500
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGRM () Delete
Name: FANJUL RYAN, MARIA CRISTINA
Address: C/O ONE NORTH CLEMATIS STREET, SUITE 500
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGRM () Delete
Name: FANJUL FERNANDEZ, LILLIAN
Address: C/O ONE NORTH CLEMATIS STREET, SUITE 500
City-St-Zip: WEST PALM BEACH, FL 33401 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIAL LEBOW, ESQ., AUTHORIZED REP. AR 03/09/2007

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