

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000071391

**Entity Name:** TG-EG, LLC

**Current Principal Place of Business:**

595 W. GRANADA BLVD A  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

7901 4TH ST N STE 300  
FLORIDA REGISTERED AGENT LLC  
ST. PETERSBURG, FL 33702 US

**FEI Number:** 20-3179137

**Certificate of Status Desired:** No

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

FLORIDA REGISTERED AGENT LLC  
7901 4TH ST N STE 300  
FLORIDA REGISTERED AGENT LLC  
ST. PETERSBURG, FL 33702 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:** JANET GILLESPIY

04/26/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GILLESPIY, JANET  
Address 595 W. GRANADA BLVD A  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name GILLESPIY, THURMAN III  
Address 595 W. GRANADA BLVD A  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name GILLESPIY, JOHN F  
Address 595 W. GRANADA BLVD A  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name GILLESPIY, ALBERT W  
Address 595 W. GRANADA BLVD A  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name GILLESPIY, MARK C  
Address 595 W. GRANADA BLVD A  
City-State-Zip: ORMOND BEACH FL 32174

Title MGR  
Name GILLESPIY-GOLDSTEIN, MICHELLE  
Address 595 W. GRANADA BLVD A  
City-State-Zip: ORMOND BEACH FL 32174

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JANET GILLESPIY

**MANAGER**

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date