

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000045139

Entity Name: TSPFL-RSS HOLDING, L.L.C.**Current Principal Place of Business:**100 SECOND AVENUE NORTH
ST. PETERSBURG, FL 33701**Current Mailing Address:**228 ST. CHARLES AVENUE
ATTN: TERESA LYGATE SUITE 626
NEW ORLEANS, LA 70130 US**FEI Number:** 27-0194467**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LENT, CHRISTINE E
100 SECOND AVENUE NORTH
ST. PETERSBURG, FL 33701 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MGRM
Name	WHITNEY BANK
Address	228 ST. CHARLES AVENUE
City-State-Zip:	NEW ORLEANS LA 70130

Title	MGR
Name	EXNICIOS, JOSEPH S
Address	228 ST. CHARLES AVENUE
City-State-Zip:	NEW ORLEANS LA 70130

Title	MGR
Name	DUBOS, LOUIS R
Address	228 ST. CHARLES AVENUE
City-State-Zip:	NEW ORLEANS LA 70130

Title	MGR
Name	LINDSEY, DALE JR
Address	228 ST. CHARLES AVENUE
City-State-Zip:	NEW ORLEANS LA 70130

Title	ASST. SECRETARY
Name	LYGATE, TERESA Z.
Address	228 ST. CHARLES AVENUE, SUITE 626
City-State-Zip:	NEW ORLEANS LA 70130

Title	ASST. SECRETARY
Name	AYRES, ANIKO K.
Address	228 ST. CHARLES AVENUE, SUITE 626
City-State-Zip:	NEW ORLEANS LA 70130

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TERESA Z. LYGATE**ASSISTANT SECRETARY** 04/30/2013_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date