

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008471

FILED
Apr 01, 2009
Secretary of State

Entity Name: TABB LIMITED LIABILITY COMPANY

Current Principal Place of Business:

333 S. STATE ROAD 415
OSTEEN, FL 32764

New Principal Place of Business:

Current Mailing Address:

333 S. STATE ROAD 415
OSTEEN, FL 32764

New Mailing Address:

333 S. STATE ROAD 415
OSTEEN, FL 32764

FEI Number: 59-3686230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHIGHAM, FRANK C
1001 HEATHROW PARK LANE
SUITE 4001
LAKE MARY, FL 32746 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: TABB, TERRY K
Address: 690 LEMON BLUFF ROAD
City-St-Zip: OSTEEN, FL 32764

Title: MGRM () Delete
Name: TABB, TIMOTHY M
Address: 490 CLARK HILL ROAD
City-St-Zip: OSTEEN, FL 32764

ADDITIONS/CHANGES:

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: TIMOTHY M TABB

MGRM

04/01/2009

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