2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L0000009546

1. Entity Name TAMPACO L.C.



Principal Place of Business

1001 E ATLANTIC AVE

STE 202

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELRAY BEACH, FL 33483

Mailing Address

1001 E ATLANTIC AVE

STE 202

DELRAY BEACH, FL 33483

US.



FILED

Apr 27, 2005 08:00 AM Secretary of State

01102005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 02-0602009

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accep	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstaling)	DATE	
Fi De	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAĞINĞ MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALSH, MARK 1001 E ATLANTIC AVE, STE 202 DELRAY BEACH, FL 33483		U00000335214 04/27/05-80075-016 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALSH, MICHAEL 1001 E ATLANTIC AVE, STE 202 DELRAY BEACH, FL 33483		04/21/05-00015-010 150*00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE	
TITLE				

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: WALL WALL SIGNATURE AND TYPED OF FRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/25/05

(SW) 279-990