

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L01000000056

FILED
Aug 03, 2005
Secretary of State

Entity Name: T.L.C. PROFESSIONAL PROPERTIES, L.L.C.

Current Principal Place of Business:

104 S. CLYDE AVE.
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

104 S. CLYDE AVE.
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 59-3698588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACK, A. CLIFTON
104 S. CLYDE AVE.
KISSIMMEE, FL 34741 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: P () Delete
Name: BLACK, A. CLIFTON
Address: 104 S. CLYDE AVE.
City-St-Zip: KISSIMMEE, FL 34741

Title: ST () Delete
Name: KARACAN, ISMET
Address: 5211 WIGTON ST.
City-St-Zip: HOUSTON, TX 77096

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BLACK, A. CLIFTON
Address: 104 S. CLYDE AVE.
City-St-Zip: KISSIMMEE, FL 34741

Title: MGRM (X) Change () Addition
Name: KARACAN, ISMET
Address: 5211 WIGTON ST.
City-St-Zip: HOUSTON, TX 77096

I hereby certify that the information supplied with this filing does not qualify for the 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 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: A. CLIFTON BLACK

MGRM

08/03/2005

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