

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000013828

1. Entity Name
T&G INVESTMENT PARTNERS, LLC



Principal Place of Business
8623 COMMODITY CIRCLE
ORLANDO, FL 32819

Mailing Address
8623 COMMODITY CIRCLE
ORLANDO, FL 32819



04232007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3615114

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WRIGHT, MICHAEL T
8623 COMMODITY CIRCLE
ORLANDO, FL 32819

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000757012
05/23/07-80048-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR GONZALEZ, RICARDO H 8623 COMMODITY CIRCLE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR GRABOSKY, DAVID M 8623 COMMODITY CIRCLE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR WRIGHT, MICHAEL T 8623 COMMODITY CIRCLE ORLANDO, FL 32819
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/23/07