2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# L02000001405

Entity Name: TAM, LLC

Current Principal Place of Business:

400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODWIN, JAMES W
400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602

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/MEMBERS:

Title: MGR ( ) Delete
Name: HAYES, SHARILYN
Address: 400 NORTH TAMPA STREET
City-St-Zip: TAMPA, FL 33602

Title: MGR ( ) Delete
Name: HAYES, SHARON B
Address: 400 NORTH TAMPA STREET
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: HAYES, TIMOTHY A
Address: 400 NORTH TAMPA STREET
City-St-Zip: TAMPA, FL 33602

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: TIMOTHY A. HAYES MGR 04/26/2004

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