


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000016349

1. Entity Name
PUBLIX TENNESSEE, LLC



Principal Place of Business
**3300 PUBLIX CORPORATE PKWY
 LAKELAND, FL 33811-3003**

Mailing Address
**PO BOX 32018
 TREASURY LICENSES
 LAKELAND, FL 33802-2018**



04172006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0626221

Applied For
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ATTAWAY, JOHN A JR
 3300 PUBLIX CORPORATE PKWY
 LAKELAND, FL 33811-3003**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CRENSHAW, WILLIAM
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 338113003
TITLE	MGRM
NAME	MOORE, ROBERT H
STREET ADDRESS	2600 DELK ROAD
CITY-ST-ZIP	MARIETTA, GA 300676202
TITLE	MGRM
NAME	PHILLIPS, DAVID P
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 338113003
TITLE	MGRM
NAME	ATTAWAY, JOHN A JR.
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 338113003
TITLE	MGRM
NAME	MILLER, SHARON A
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 338113002
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000530680
 05/06/06-80005-011 55.00

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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:  **John A. Attaway Jr** 04/20/06 863-688-7404

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #