

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023304

Entity Name: T.D.M. OF FLORIDA, LLC

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

3277 OLD BARN RD W
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

3277 OLD BARN RD WEST
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

P.O. BOX 3105
PONTE VEDRA BEACH, FL 320043105

New Mailing Address:

FEI Number: 04-3711725 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MIRON, DAVID A
3277 OLD BARN RD W
PONTE VEDRA BEACH, FL 32082 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: MGRM () Delete
Name: MIRON, DAVID A
Address: 3277 OLD BARN RD W
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MIRON, DAVID A
Address: 3277 OLD BARN RD WEST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID A. MIRON

MGRM

03/16/2009

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