## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L02000023519**1. Entity Name

TES OUR TURN LLC



Principal Place of Business

2211 S.W. 83RD COURT GAINESVILLE, FL 32607 Mailing Address

2211 S.W. 83RD COURT GAINESVILLE, FL 32607

## FILED Apr 16, 2008 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

04152008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 71-0905139 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

BLACHLY, JUDY 2211 S.W. 83RD COURT GAINESVILLE, FL 32607

## 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 little if applicable

(NOTE Registered Agent signature required when renetating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 

4.4 1	
9.	MANAGING MEMBERS/MANAGERS
THLE	MGRM
NAME	LUCKACOVIC, JOHN TO THE PROPERTY OF THE PROPER
STREET ADDRESS	510 WEST 123RD STREET, #67
CITY-ST-ZIP	NEW YORK, NY 10027
TITLE	MGRM
NAME	BLACHLY, MICHAEL
STREET ADDRESS	2211 S.W. 83RD COURT
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	MGRM
NAME	OLDHAM, ELEANOR
STREET ADDRESS	510 WEST 123RD STREET, #67
CITY-ST-ZIP	NEW YORK, NY 10027
TITLE	MGRM
NAME	BLACHLY, JUDY
STREET ADDRESS	2211 S.W. 83RD COURT
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	( v <sup>2</sup> ω <sup>2</sup> .
NAME	A 10 M ROLLING MANAGEMENT
STREET ADDRESS	to a summaring the second of the second seco
CITY-ST-ZIP-2: 3	41 30/09 BS9 ME/ 21 1/ 40/ 3/3/
	· · · · · · · · · · · · · · · · · · ·

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: SERVE

21.16.08

257/337-1.339

SIGNATURE AND TYPED OR PRINTED HOME OF SIGNING MUNAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Dete

Devime Phone #