

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L02000024156

**Entity Name:** TDA FLORIDA SOUTH, LLC

**FILED**  
**Jan 05, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

6211 MEDICI COURT SUITE 104  
SARASOTA, FL 34243

**New Principal Place of Business:**

4850 BRYWILL CIRCLE  
SARASOTA, FL 34243

**Current Mailing Address:**

6211 MEDICI COURT SUITE 104  
SARASOTA, FL 34243

**New Mailing Address:**

4850 BRYWILL CIRCLE  
SARASOTA, FL 34243

**FEI Number:** 11-3654446      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BONANNO, JOHN D ESQ.  
601 12TH STREET W  
BRADENTON, FL 34205      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: JOHN BONANNO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: DRISCOLL, ANTHONY J  
Address: 6211 MEDICI CT STE 104  
City-St-Zip: SARASOTA, FL 34243

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: DRISCOLL, ANTHONY J  
Address: 4850 BRYWILL CIRCLE  
City-St-Zip: SARASOTA, FL 34243

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: ANTHONY DRISCOLL

CEO

01/05/2005

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