

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002884

**FILED**  
**Apr 27, 2009**  
**Secretary of State**

**Entity Name:** TI DEVELOPMENT OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

255 MAGNOLIA AVENUE, SOUTHWEST  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

% MARK TURNER  
P.O. BOX 2295  
WINTER HAVEN, FL 33880

**New Mailing Address:**

% MARK TURNER  
P.O. BOX 2295  
WINTER HAVEN, FL 338832295

FEI Number: 02-0674658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TURNER, MARK G ESQUIRE  
255 MAGNOLIA AVENUE  
WINTER HAVEN, FL 33880 US

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

TURNER, MARK G  
255 MAGNOLIA AVENUE  
WINTER HAVEN, FL 33880 US

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: MARK G. TURNER

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TURNER INVESTMENTS, LTD.  
Address: PO BOX 7311  
City-St-Zip: WINTER HAVEN, FL 338837311

**ADDITIONS/CHANGES:**

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

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: MARK G. TURNER

P

04/27/2009

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