

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90020 004 ****50.00

DOCUMENT # L03000003351

1. Entity Name
TGG ASSET MANAGEMENT, LLC



Principal Place of Business
~~4412 ENDICOTT PLACE~~
~~TAMPA, FL 33624~~

Mailing Address
~~13014 N DALE MADRY HWY~~
~~330~~
~~TAMPA, FL 33618~~



2. Principal Place of Business
3630 W. Kennedy Blvd
Suite, Apt. #, etc.

3. Mailing Address
3630 W. Kennedy Blvd.
Suite, Apt. #, etc.

03082006 Chg-LLC CR2E083 (11/05)

City & State
Tampa, FL
Zip
33609
Country

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Country

4. FEI Number
65-1194399
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GENTILE, MICHAEL L
~~4412 ENDICOTT PLACE~~
~~TAMPA, FL 33624~~

Name
Street Address (P.O. Box Number is Not Acceptable)
3630 W. Kennedy Blvd.
City Tampa FL Zip Code 33609

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 Michael L. Gentile Michael L. Gentile 3/30/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME MGRM
STREET ADDRESS THE GENTILE GROUP, LLC
CITY - ST - ZIP 13014 NORTH DALE MADRY HWY STE 330
TAMPA, FL 33618 ☐ Delete

TITLE
NAME MGRM
STREET ADDRESS The Gentile Group, LLC
CITY - ST - ZIP 3630 W. Kennedy Blvd.
Tampa, FL 33609 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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: Michael L. Gentile Michael L. Gentile MGRM 3/30/06 813-673-8510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #