


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000015117 1. Entity Name TEYTELBAUM / GRAHAM, LLC	
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Principal Place of Business 585 MAIN ST #201 DUNEDIN, FL 34698 US	Mailing Address 585 MAIN ST #201 DUNEDIN, FL 34698 US
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 05-0574090	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GRAHAM, THOMAS J 585 MAIN ST #201 DUNEDIN, FL 34698	DO NOT WRITE IN THIS SPACE
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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM TEYTELBAUM, RENATA 601 MAIN STREET DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM GRAHAM, T. JAMES 28100 U.S. HWY 19 NORTH, SUITE 507 CLEARWATER, FL 33761
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM GRAHAM, ELIZABETH F 28100 U.S. HWY 19 NORTH, SUITE 507 CLEARWATER, FL 33761
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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03/06/07-80006-018 50.00

**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Thomas J. Graham,
Partner

Date

2/21/07 727-733-9400

Daytime Phone #