


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90043 031 ****50.00

DOCUMENT # L03000024800 1. Entity Name TPM INVESTMENTS, LLC	
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Principal Place of Business 8059 FOUNTAINS LANE DESTIN, FL 32550 US	Mailing Address 8059 FOUNTAINS LANE DESTIN, FL 32550 US
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DO NOT WRITE IN THIS SPACE



02102006 No Chg-LLC

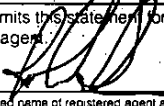
CR2E083 (11/05)

4. FEI Number 20-0232921	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 PAULSEN, JOHN 8059 FOUNTAINS LANE DESTIN, FL 32550	8058 FOUNTAINS LN
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**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  (NOTE: Registered Agent signature required when reinstating)

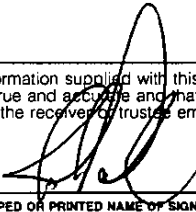
DATE 2/13/06

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMPSON, CHARLES 3103 GLENDALE COLLYVILLE, TX 76034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOSS, PHILIP 1998 COTTAGE GLENN CRICLE EAST GERMANTOWN, TN 38138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PAULSEN, JOHN 8059 FOUNTAINS LANE DESTIN, FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOSS, DOUG 10040 NATIONAL CLUB DRIVE COLLIERVILLE, TN 38017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  2/13/06 850-496-3637

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #