## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT #L03000031497

1. Entity Name

T & C PREMIER INVESTMENTS, L.L.C.



Principal Place of Business

635 RIVIERA DRIVE BOYNTON BEACH, FL 33435 Mailing Address

635 RIVIERA DRIVE BOYNTON BEACH, FL 33435





02022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1203675 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WEEKS, SUSAN A 1325 S. CONGRESS AVENUE, SUITE 205 BOYNTON BEACH, FL 33426

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	bligations of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
JUNA	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, 2007	
9.	. MANAGING MEMBERS/MANAGERS	1
TITLE	MGRM	
NÄME	WEEKS, RAYMOND E	

STREET ADDRESS 635 RIVIERA DRIVE CITY-ST-ZIP BOYNTON BEACH, FL 33435 MGRM TITLE WEEKS, SUSAN A NAME STREET ADDRESS 635 RIVIERA DR BOYNTON BEACH, FL 33435 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE

U00000765270 05/31/07-80032-012 50.00

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11. I hereby certify that the information supplied with this filling 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

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS

JRE: RYMOVD WEEKS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

May 1,

561.738.7613

Daytime Phone #