

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037532

Entity Name: TLT PROPERTIES, LLC

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

10016 PARK PLACE AVENUE
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

10016 PARK PLACE AVENUE
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 01-0799158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ.
C/O LASMAN & ASSOCIATES, P.A.
115 PROVIDENCE ROAD
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

THATCHER, BRYAN S
10016 PARK PLACE
RIVERVIEW, FL 33578 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: BRYAN THATCHER

01/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THATCHER, SUSAN A
Address: 2111 ISLE OF PALMS DRIVE
City-St-Zip: VALRICO, FL 33594

Title: MGRM () Delete
Name: LUBBERS, DAVID J
Address: 808 WINDGATE COURT
City-St-Zip: VILLA HILLS, KY 410171311

Title: MGR () Delete
Name: BRYAN, THATCHER S
Address: 2111 ISLE OF PALMS
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES:

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

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

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: BRYAN THATCHER

MGR

01/12/2009

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