

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038448

FILED
Feb 27, 2009
Secretary of State

Entity Name: TLC PROPERTIES OF LAKELAND LLC

Current Principal Place of Business:

8624 HARRISON RD.
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1086
LAKELAND, FL 33802 US

New Mailing Address:

FEI Number: 20-0294275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONBOY, TERESA
8624 HARRISON RD.
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CONBOY, TERESA
Address: 8624 HARRISON RD.
City-St-Zip: LAKELAND, FL 33810 US

Title: MGRM () Delete
Name: CONBOY, TIM
Address: 8624 HARRISON RD
City-St-Zip: LAKELAND, FL 33810

Title: MGR (X) Delete
Name: CUTTELL, MICHELE
Address: 8624 HARRISON RD
City-St-Zip: LAKELAND, FL 33810

Title: MGR (X) Delete
Name: CONBOY, JACOB
Address: 8624 HARRISON RD.
City-St-Zip: LAKELAND, FL 33810

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:

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: TERESA CONBOY

MGRM

02/27/2009

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