

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044509

Entity Name: TERRY TENNEBOE, LLC

FILED
Jan 13, 2008
Secretary of State

Current Principal Place of Business:

433 FONTANA DRIVE
PALM SPRINGS, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

433 FONTANA DRIVE
PALM SPRINGS, FL 33461 US

New Mailing Address:

FEI Number: 50-3626010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TENNEBOE, TERRY N
433 FONTANA DRIVE
PALM SPRINGS, FL 33461 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: TENNEBOE, TERRY N
Address: 433 FONTANA DRIVE
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TENNEBOE, TERRY N
Address: 433 FONTANA DRIVE
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: MGRM () Change (X) Addition
Name: BECKER, JOEL
Address: 200 SW BRANDY WAY
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Change (X) Addition
Name: GOODWIN, MICHAEL G
Address: 3982 W. HAMILTON KEY
City-St-Zip: WEST PALM BEACH, FL 33411

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: TERRY N. TENNEBOE

MGR

01/13/2008

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