

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000045509

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Entity Name:** TCME, L.L.C.

**Current Principal Place of Business:**

C/O JOHN A. MORAN  
1990 MAIN ST, STE 700  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN A. MORAN  
P.O. BOX 3948  
SARASOTA, FL 34230 US

**New Mailing Address:**

**FEI Number:** 54-2134320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORAN, JOHN A ESQ  
C/O DUNLAP & MORAN, P.A.  
1990 MAIN STREET, STE 700  
SARASOTA, FL 34236 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: RA  
Name: MORAN, JOHN A  
Address: P.O. BOX 3948  
City-St-Zip: SARASOTA, FL 34230

I hereby 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:** KURT STOCKAMP

MGRM

04/02/2010

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