

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000051199

Entity Name: T M TRIM, LLC

**FILED**  
**Aug 18, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

7127 FONZA ROAD  
SOUTHPORT, FL 32409

**New Principal Place of Business:**

**Current Mailing Address:**

7127 FONZA ROAD  
SOUTHPORT, FL 32409

**New Mailing Address:**

FEI Number: 32-0100683      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MCEWEN, TIMOTHY  
7127 FONZA ROAD  
SOUTHPORT, FL 32409      US

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

MCEWEN, TIMOTHY M  
7127 FONZA ROAD  
SOUTHPORT, FL 32409      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: TIMOTY M MCEWEN

08/18/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MCEWEN, TIMOTHY  
Address: 7127 FONZA ROAD  
City-St-Zip: SOUTHPORT, FL 32409

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY M MCEWEN

MGRM

08/18/2005

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