

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000057557

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TNA, LLC

**Current Principal Place of Business:**

511 NOAH LANE  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

2430 HWY 34  
A-26  
MANASQUAN, NJ 08736

**New Mailing Address:**

2629 HWY 70  
MANASQUAN, NJ 08736

FEI Number: 30-0244574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

IRISH, GEORGE P  
510 NOAH LANE  
KEY WEST, FL 33040 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: IRISH, GEORGE P  
Address: 2 SHORE LINE DRIVE  
City-St-Zip: LAKEVILLE, PA 18438

Title: MGR ( ) Delete  
Name: DUFFY, DANIEL J  
Address: 134 LINCOLN AVE.  
City-St-Zip: AVON, NJ 07717

Title: MGR ( ) Delete  
Name: CANNOVA, JOSEPH A  
Address: 116 SHEANDOAH BLVD.  
City-St-Zip: TOMS RIVER, NJ 08783

Title: MGR ( ) Delete  
Name: COSTELLO, RONALD  
Address: 2421 ATLANTIC AVE SUITE 101  
City-St-Zip: MANASQUAN, NJ 08736

**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: DANIEL J. DUFFY

MGR

04/30/2009

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