2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# L04000001520

Entity Name: T AND S, LLC

Current Principal Place of Business:

21275 OLEAN BLVD.
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

%DAVID A HOLMES-FARR,FARR,EMERICH, SIFRIT
POST OFFICE DRAWER 511447
PUNTA GORDA, FL 339511447

New Mailing Address:

FEI Number: 20-0631773 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLMES, DAVID A ESQ
FARR,FARR,EMERICH,SIFRIT,HACKETT AND CARR
99 NESBIT ST
PUNTA GORDA, FL 339503636 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/MEMBERS:

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

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

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: SPADAFORA, JOSEPH DR
Address: 317 SEVERIN ROAD
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGR ( ) Change (X) Addition
Name: THOMPSON, KEITH M DR
Address: 700 N RIVER ROAD
City-St-Zip: VENICE, FL 34293

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: KEITH M THOMPSON MGR 04/25/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date