

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000010525

Entity Name: TCD REALTY, LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

140 SOUTHWEST CHAMBER COURT, SUITE 200  
PORT ST. LUCIE, FL 34986

## **New Principal Place of Business:**

140 S.W. CHAMBER COURT  
SUITE 200  
PORT ST. LUCIE, FL 34986

## **Current Mailing Address:**

140 SOUTHWEST CHAMBER COURT, SUITE 200  
PORT ST. LUCIE, FL 34986

## **New Mailing Address:**

140 S.W. CHAMBER COURT  
SUITE 200  
PORT ST. LUCIE, FL 34986

FEI Number: 06-1717359

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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  
Name: IOANNIDES, TIM  
Address: 140 S.W. CHAMBER COURT, SUITE 200  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: MGRM  
Name: SANDERS, JON  
Address: 140 S.W. CHAMBER COURT, SUITE 200  
City-St-Zip: PORT ST. LUCIE, FL 34986

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: TIM IOANNIDES

MGRM

04/28/2011

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