

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031866

Entity Name: TAVEE, LLC

FILED
Jul 14, 2005
Secretary of State

Current Principal Place of Business:

113 OLD CARRIAGE ROAD
ONCE INLET, FL 32127

New Principal Place of Business:

113 OLD CARRIAGE ROAD
PONCE INLET, FL 32127

Current Mailing Address:

113 OLD CARRIAGE ROAD
ONCE INLET, FL 32127

New Mailing Address:

113 OLD CARRIAGE ROAD
PONCE INLET, FL 32127

FEI Number: 20-1050775 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:

PALMETTO CHARTER SERVICES, INC.
1501 MAGNOLIA AVENUE
DAYTONA BEACH, FL 321152491 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: FULTON, CHRIS
Address: 113 OLD CARRIAGE ROAD
City-St-Zip: ONCE INLET, FL 32127

Title: MGRM () Delete
Name: FULTON, KELLEEE
Address: 113 OLD CARRIAGE ROAD
City-St-Zip: ONCE INLET, FL 32127

ADDITIONS/CHANGES:

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 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: CHRIS FULTON

MGR

07/14/2005

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