

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035636

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: T&D CONSOLIDATED INVESTMENTS, LLC

**Current Principal Place of Business:**

12062 W. MARLIN COURT  
HOMOSASSA, FL 34448

**New Principal Place of Business:**

**Current Mailing Address:**

12062 W. MARLIN COURT  
HOMOSASSA, FL 34448

**New Mailing Address:**

FEI Number: 20-1101767

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRAWFORD, JOHN R  
1200 RIVERPLACE BLVD., SUITE 800  
JACKSONVILLE, FL 32207 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: MGR ( ) Delete  
Name: DAVENPORT, RICHARD  
Address: 5170 SOUTH RIVERVIEW CIRCLE  
City-St-Zip: HOMOSASSA, FL 34448

Title: MGR ( ) Delete  
Name: DAVENPORT, NANCY  
Address: 5170 SOUTH RIVERVIEW CIRCLE  
City-St-Zip: HOMOSASSA, FL 34448

Title: MGR ( ) Delete  
Name: THOMAS, DENNIS  
Address: 3007 E. LAKE ROAD  
City-St-Zip: MCDONOUGH, GA 30252

Title: MGR ( ) Delete  
Name: THOMAS, PEGGY  
Address: 3007 E. LAKE ROAD  
City-St-Zip: MCDONOUGH, GA 30252

**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: RICHARD DAVENPORT

MGR

01/14/2008

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