

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Jun 04, 2008 8:00 am
Secretary of State

DOCUMENT # L04000036398

1. Entity Name

TMS COMPANY LLC



06-04-2008 90257 013 ***138.75

Principal Place of Business
1275 COUNTY ROAD 210 WEST
JACKSONVILLE FL 32259

Mailing Address
1275 COUNTY ROAD 210 WEST
JACKSONVILLE FL 32259



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/07)

City & State

City & State

4. FEI Number
20-0645036

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIAMS, FRED M
1275 COUNTY ROAD 210 WEST
JACKSONVILLE FL 32259

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and the filer (if applicable)

(NOTE: Registered agent's signature required when registering)

DATE

FILE NOW!!! FEE IS \$138.75

After May 1, 2008, Fee Will Be \$538.75

Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE ~~MGRM~~ ☐ Delete
NAME CARTER, MELVIN O
STREET ADDRESS 1275 COUNTY RD 210 W
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE ~~MGRM~~ ☐ Delete
NAME WILLIAMS, FRED M
STREET ADDRESS 1275 COUNTY RD 210 W
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Vice President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Vice President ☐ Change ☒ Addition
NAME Carter, Danner
STREET ADDRESS 1275 County Road 210 W.
CITY-ST-ZIP Jacksonville, FL 32259

TITLE Vice President ☐ Change ☒ Addition
NAME Carter, Kevin
STREET ADDRESS 1275 County Road 210 W.
CITY-ST-ZIP Jacksonville, FL 32259

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Melvin O. Carter - Pres

4-28-08

904-826-0101

Date

Signature Print it