

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 28, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000039533

1. Entity Name  
TMSM PROPERTIES, LLC



Principal Place of Business  
2926 W HAWTHORNE ROAD  
TAMPA, FL 33611

Mailing Address  
2926 W HAWTHORNE ROAD  
TAMPA, FL 33611



01162007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

34-2007015

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

HINES, JAMES P  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606

**DO NOT WRITE  
IN THIS SPACE**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

000000681273  
04/04/07-80037-007 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGR  
NAME SPENCER-HILLS, TONYA  
STREET ADDRESS 2926 W HAWTHORNE ROAD  
CITY-ST-ZIP TAMPA, FL 33611

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CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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, OR AUTHORIZED REPRESENTATIVE

Tonya S. Hills

Date

Daytime Phone #

2-7-07 813-831-1245