# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 31, 2008**
**Secretary of State**

DOCUMENT# L04000041820

**Entity Name:** TAMPA GROUP, LLC

**Current Principal Place of Business:**

17712 SHANNON OAKS COURT
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

17712 SHANNON OAKS COURT
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number: 59-2766219** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

SCHECHT, NEIL S
360 WEST KENNEDY BLVD.
TAMPA, FL 33609 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: | CELEIRO, ARMANDO | |
| Address: | 525 SOUTH 58TH ST | |
| City-St-Zip: | TAMPA, FL 33619 | |
| Title: | MGRM | ( ) Delete |
| Name: | CELEIRO, IRAIDA | |
| Address: | 525 SOUTH 58TH ST. | |
| City-St-Zip: | TAMPA, FL 33619 | |
| Title: | MGRM | ( ) Delete |
| Name: | O'CONNNELL, JEROME D | |
| Address: | 17712 SHANNON OAKS COURT | |
| City-St-Zip: | TAMPA, FL 33647 | |
| Title: | MGRM | ( ) Delete |
| Name: | O'CONNNELL, IRENE E | |
| Address: | 17712 SHANNON OAKS COURT | |
| City-St-Zip: | TAMPA, FL 33647 | |
| Title: | MGRM | ( ) Delete |
| Name: | RILEY, COLLEEN | |
| Address: | 1944 CAMELLIA OAKS LANE | |
| City-St-Zip: | JACKSONVILLE, FL 32217 | |

**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: | |
| 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: IRENE OCONNELL MGRM 03/31/2008

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