

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000049683

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** T. S. FIELDS PROPERTIES, LLC

**Current Principal Place of Business:**

21701 S.W. 187TH AVENUE  
MIAMI, FL 33170

**New Principal Place of Business:**

**Current Mailing Address:**

21701 S.W. 187TH AVENUE  
MIAMI, FL 33170

**New Mailing Address:**

**FEI Number:** 20-1413124

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIELDS, THOMAS S MGRM  
21701 SW 187 AVE  
MIAMI, FL 33170 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  
**Name:** FIELDS, THOMAS S  
**Address:** 21701 S.W. 187TH AVENUE  
**City-St-Zip:** MIAMI, FL 33170

**Title:** MGRM  
**Name:** FIELDS, SHARON A  
**Address:** 21701 S.W. 187TH AVENUE  
**City-St-Zip:** MIAMI, FL 33170

I hereby 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:** SHARON A. FIELDS

MGRM

02/21/2011

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