2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061257

Entity Name: TF PROPERTIES I, LLC

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19 NW 5TH STREET 508 NW 1ST AVE

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

19 NW 5TH STREET 508 NW 1ST AVE

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301

FEI Number: 20-2345899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOFBAUER, LUTZ
19 NW 5TH STREET
HOFBAUER, LUTZ
508 NW 1ST AVE

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 US

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: 04/28/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 HOFBAUER, LUTZ
 Name:
 HOFBAUER, LUTZ

 Address:
 21 NW 5TH STREET
 Address:
 508 NW 1ST AVE

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MCCRAW, DOUGLAS Name: MCCRAW, DOUGLAS

Address: 21 NW 5TH STREET Address: 508 NW 1ST AVE

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33301

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: LUTZ M HOFBAUER MGRM 04/28/2008