

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066237

Entity Name: TLC ADVENTURES, LLC

FILED  
Jan 21, 2005  
Secretary of State

**Current Principal Place of Business:**

521 REDBERRY LANE  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

13820 ST. AUGUSTINE ROAD  
209  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

521 REDBERRY LANE  
JACKSONVILLE, FL 32259

**New Mailing Address:**

13820 ST. AUGUSTINE ROAD  
209  
JACKSONVILLE, FL 32258

FEI Number: 34-2018268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PIUS, CHRISTOPHER J  
521 REDBERRY LANE  
JACKSONVILLE, FL 32259 US

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

PIUS, CHRISTOPHER J  
13820 ST. AUGUSTINE ROAD  
201  
JACKSONVILLE, FL 32258 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: \_\_\_\_\_

01/21/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: PIUS, CHRISTOPHER J  
Address: 13820 ST. AUGUSTINE ROAD  
City-St-Zip: JACKSONVILLE, FL 32258 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER J. PIUS

MGRM

01/21/2005

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