2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071879

Entity Name: TBI 6, LLC

FILED Mar 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2240 WEST FIRST STREET SUITE 100 FORT MYERS, FL 33901 **New Mailing Address: Current Mailing Address:** 2240 WEST FIRST STREET SUITE 100 FORT MYERS, FL 33901 FEI Number: 20-1717514 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: ADKINS, STEVEN D 2240 WEST FIRST STREET SUITE 100 FORT MYERS, FL 33901 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ADKINS, STEVEN D Name: Name: 2240 WEST FIRST STREET, SUITE 100 Address: Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: Title: MGR () Delete Title: () Change () Addition SCHNEIDER, TOBEY Name: Name: Address: 2240 WEST FIRST STREET, SUITE 100 Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: Title: MGR () Delete Title: () Change () Addition ADKINS, DALE Name: Name: 2240 WEST FIRST STREET, SUITE 100 Address: Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: MGR () Delete CHESLOSKY, JAMES Title: Title: () Change () Addition Name: Name: Address: 2240 WEST FIRST STREET, SUITE 100 Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition PETT, JERRY Name: Name: DECK, ROBERT 2240 WEST FIRST STREET, SUITE 100 2240 WEST FIRST STREET, SUITE 100 Address: Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33901 Title: () Delete Title: () Change () Addition STATHO, DENNIS Name: Name: Address: 2240 WEST FIRST STREET, SUITE 100 Address: FORT MYERS, FL 33901 City-St-Zip: 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: STEVEN D. ADKINS MGM 03/14/2008