## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000073434

Entity Name: T&S INVESTMENTS, LLC

20 DONDANVILLE RD., APT. 605

ST. AUGUSTINE, FL 32080 US

Address:

City-St-Zip:

FILED Apr 16, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3975 FORRESTAL AVENUE SUITE 600 ORLANDO, FL 32806 **Current Mailing Address: New Mailing Address:** 3975 FORRESTAL AVENUE SUITE 600 ORLANDO, FL 32806 US FEI Number: 20-1034131 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: STORMANT, CLARENCE R 20 DONDANVILLE RD. APT. 604 ST. AUGUSTINE, FL 32080 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: () Delete Title: () Change () Addition STORMANT, CLARENCE R Name: Name: Address: 20 DONDANVILLE RD., APT. 604 Address: City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: TANNOUS, FUAD E Name: Address: 20 DONDANVILLE RD., APT. 605 Address: City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition STORMANT, SANDRA P Name: Name: 20 DONDANVILLE RD., APT. 604 Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32080 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: TANNOUS, SUZIE E Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: CLARENCE STORMANT MGR 04/16/2007