2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L04000075616

1. Entity Name T2C, L.L.C.



FILED Jan 27, 2006 08:00 AN Secretary of State

Principal Place of Business

3600 N.W. BOCA RATON BLVD BOCA RATON, FL 33431

Mailing Address

3600 N.W. BOCA RATON BLVD BOCA RATON, FL 33431



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01232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 42-1648878 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEWIS, TIMOTHY R 3600 N.W. BOCA RATON BLVD BOCA RATON, FL 33431

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 The above named entity submits this statement for the purpose of cha the obligations of registered agent. 	nging its registered offic	ce or registered agent, or both, in th	e State of Florida. I am familia	r with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title it applicable.	(NOTE, Registered Agent :	signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2006		-		3 8 8 2 4

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEWIS, TIMOTHY R 3600 N.W. BOCA RATON BLVD BOCA RATON, FL 33431		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

U00000404407 02/06/06-80045-014 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 shipowored to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

au SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE