

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077684

Entity Name: TAMPALIVING, LLC

FILED  
Apr 23, 2007  
Secretary of State

## Current Principal Place of Business:

9566 TREASURE LANE, NE  
ST. PETE, FL 33702

## New Principal Place of Business:

1 BEACH DRIVE SE  
1512  
ST. PETE, FL 33701

## Current Mailing Address:

9566 TREASURE LANE, NE  
ST. PETE, FL 33702

## New Mailing Address:

1 BEACH DRIVE SE  
1512  
ST. PETE, FL 33701

FEI Number: 20-1798890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOMAN, VALERIE D  
9566 TREASURE LANE, NE  
ST. PETE, FL 33702 US

## Name and Address of New Registered Agent:

HOMAN, VALERIE D  
1 BEACH DRIVE SE  
1512  
ST. PETE, FL 33701 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: VALERIE HOMAN

04/23/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HOMAN, VALERIE D  
Address: 9566 TREASURE LANE, NE  
City-St-Zip: ST. PETE, FL 33702

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HOMAN, VALERIE D  
Address: 1 BEACH DRIVE SE 1512  
City-St-Zip: ST. PETE, FL 33701

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: VALERIE HOMAN

MGR

04/23/2007

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