2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Apr 19, 2005 8:00 am Secretary of State DOCUMENT # L04000080728 04-06-2005 90026 050 ****50.00 1. Entity Name TNC INVESTMENT LLC Principal Place of Business Mailing Address 30003680 10305 WATERBIRD 10305 WATERBIRD **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/04) City & State City & State Applied For 604 Not Applicable Ζ'n Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TATAR, ROBERT Street Address (P.O. Box Number is Not Acceptable) 8403 14TH AVE **BRADENTON FL 34209** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. ME MGRM nte ☐ Delete ■ Addition ☐ Change NAME CORDA, RAY STREET ADDRESS 10305 WATERBIRD STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34209 CITY-ST-ZP THEF Deteta UDF ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CUTY-Ŝ1-ZIP TITLE ☐ Delete 11115 ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BILE TITLE Defete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete HILE ☐ Change ☐ Addition MAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-SI-7IP 11. I hereby certify that the information supplied with this filing does per qualify 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 signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or justee supposes to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE:

FILED