


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 17, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000087759		
1. Entity Name AMI TIDEMARK INVESTORS, LLC		
Principal Place of Business 2202 N. WEST SHORE BLVD. SUITE 500 TAMPA, FL 33607 US	Mailing Address 2202 N. WEST SHORE BLVD. SUITE 500 TAMPA, FL 33607 US	



**DO NOT WRITE IN THIS SPACE**

04142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 11-3735080	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

KADOW, JOSEPH J  
2202 N. WEST SHORE BLVD.  
SUITE 500  
TAMPA, FL 33607

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U00000903840  
04/30/08-80062-003 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KADOW, JOSEPH J 2202 N. WEST SHORE BLVD., SUITE 500 TAMPA, FL 33607
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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 empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

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

Joseph J. Kadow

4-15-08

Date

813-282-1225

Daytime Phone #

X1177