


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000089810</b> 1. Entity Name <b>TAL ASSOCIATES, LLC</b>	
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Principal Place of Business <b>111-A EXECUTIVE CIRCLE DAYTONA BEACH, FL 32114</b>	Mailing Address <b>111-A EXECUTIVE CIRCLE DAYTONA BEACH, FL 32114</b>
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**DO NOT WRITE IN THIS SPACE**



03212008No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>20-2030876</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**LOMBARDO, ANTHONY S  
111-A EXECUTIVE CIRCLE  
DAYTONA BEACH, FL 32114**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

U00000895150  
04/24/08-80057-017 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANTHONY S LOMBARDO 111 A EXECUTIVE CIR DAYTONA BEACH, FL 32114
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IN THIS SPACE**

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:** Anthony S. Lombardo **4-8-08** **386-258-3422**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone