

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090033

Entity Name: TP ADMINISTRATORS, LLC

FILED  
Apr 21, 2005  
Secretary of State

## Current Principal Place of Business:

1440 JFK CAUSEWAY  
SUITE 301  
NORTH BAY VILLAGE, FL 33141

## New Principal Place of Business:

## Current Mailing Address:

1440 JFK CAUSEWAY  
SUITE 301  
NORTH BAY VILLAGE, FL 33141

## New Mailing Address:

FEI Number: 20-2008462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LILIAM FERNANDEZ, P.A.  
1440 JFK CAUSEWAY  
SUITE 301  
NORTH BAY VILLAGE, FL 33141 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: FERNANDEZ, LILIAM  
Address: 1440 JFK CAUSEWAY, SUITE 301  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FERNANDEZ, LILIAM  
Address: 1440 JFK CAUSEWAY, SUITE 301  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: MGRM ( ) Change (X) Addition  
Name: CARMENATE, JIMMY  
Address: 626 EAST 28 STREET  
City-St-Zip: HIALEAH, FL 33013

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LILIAM FERNANDEZ

MGRM

04/21/2005

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